988

Health United States 1988

U.S. DEPARTMENT OF HEALTH
AND HUMAN SERVICES
Public Health Service

HE 20.6223:

READEX FICHE best copy available

Copyright Information

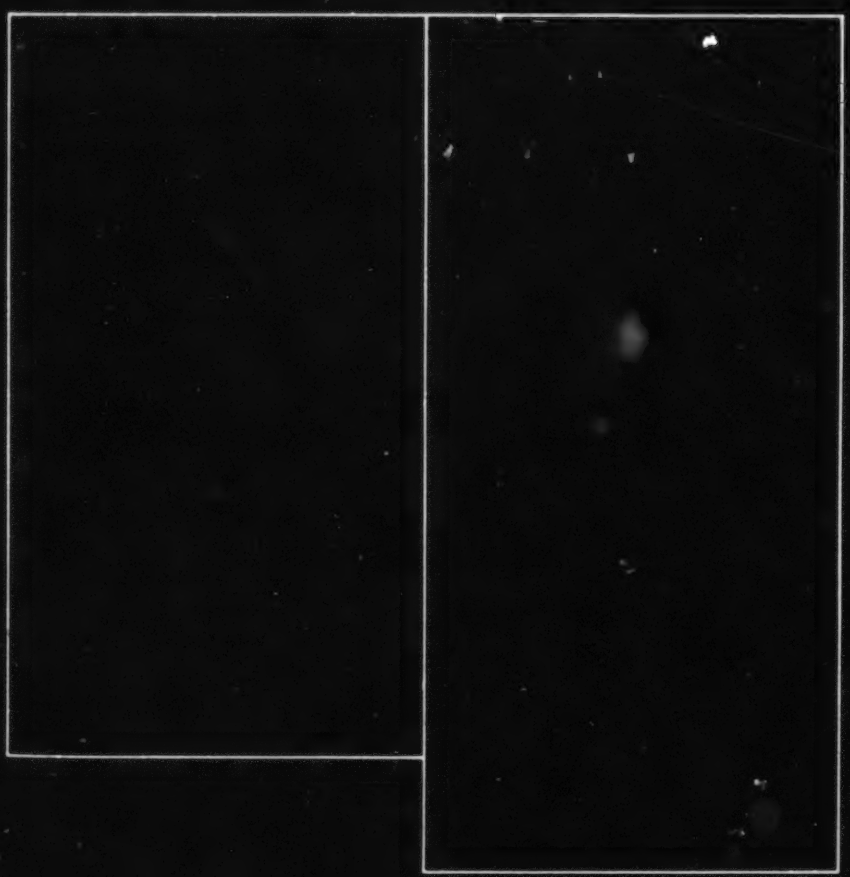
Permission has been obtained from the copyright holders to reproduce certain quoted material in this report. Further reproduction of this material is prohibited without specific permission of the copyright holder. All other material contained in this report is in the public domain and may be used and reprinted without special permission; citation as to source, however, is appreciated.

Suggested Citation

National Center for Health Statistics: *Health, United States, 1988*. DHHS Pub. No. (PHS) 89-1232. Public Health Service. Washington. U.S. Government Printing Office. Mar. 1989.

Library of Congress Catalog Card Number 76-641496

For sale by the
Superintendent of Documents
U.S. Government Printing Office
Washington, D.C. 20402



Health United States 1988

U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES
Public Health Service
Centers for Disease Control
National Center for Health Statistics

Hyattsville, Maryland
March 1989

DHHS Pub. No. (PHS) 89-1232

U.S. Department of Health and Human Services

Otis R. Bowen, M.D.
Secretary

Public Health Service

Robert E. Windom, M.D.
Assistant Secretary for Health

Centers for Disease Control

James O. Mason, M.D., Dr. P.H.
Director

National Center for Health Statistics

Manning Feinleib, M.D., Dr. P.H.
Director

Preface

Health, United States, 1988 is the 13th annual report on the health status of the Nation submitted by the Secretary of Health and Human Services to the President and Congress of the United States in compliance with Section 308(a)(1) of the Public Health Service Act, as amended by the Public Health Service Amendments of 1987 (Pub. L. 100–177). It presents statistics concerning recent trends in the health care sector. This report was compiled by the National Center for Health Statistics, Centers for Disease Control. The National Committee on Vital and Health Statistics served in a review capacity.

This report is divided into two parts. First, a chartbook on geographic variation in mortality for selected causes of death consists of 29 charts and accompanying text. Second, 125 detailed statistical tables are organized around four major subject areas—health status and determinants, utilization of health resources, health care resources, and health care expenditures. The detailed tables are designed to show continuing trends in health statistics. The major criterion used in selecting the detailed tables is the availability of comparable data over a period of several years. Similar tables appear in each volume of *Health, United States,* to enhance the use of this publication as a standard reference source. Data are reported for selected years in order to highlight major trends.

To most effectively use *Health, United States,* the reader should become familiar with the guide to tables and the two appendixes. The guide to tables provides an index to the data presented in the tables. The guide enables the reader to identify tables that crossclassify specific variables. Appendix I describes each data source used in this report and provides references for further information about the sources. Appendix II defines the terms used in the report. It also contains the standard populations used for age adjustment and *International Classification of Diseases* codes for cause of death and diagnostic and procedure categories.

Acknowledgments

Overall responsibility for planning and coordinating the content of this report rested with the Division of Analysis, Office of Analysis and Epidemiology, National Center for Health Statistics, under the supervision of Diane M. Makuc, Joel C. Kleinman, and Jacob J. Feldman. The chartbook was prepared by Mitchell B. Pierre, Jr., Diane K. Wagener, and Eve K. Moscicki. Detailed tables were prepared by Margaret A. Cooke, Virginia M. Freid, Ilene B. Gottfried, and Rebecca A. Placek with assistance from Fanchon F. Finucane, Karen Pitchersky, Mavis B. Prather, Ildy I. Shannon, and Carolyn F. Smith. Production planning and coordination were managed by Rebecca A. Placek with typing assistance from Jeanenne M. Barry and Shari L. Rapisardi.

Publications management and editorial review were provided by Rolfe W. Larson and John E. Mounts. Printing and production were managed by Linda L. Bean, assisted by Patricia L. Wilson. Text was composed by Annette F. Gaidurgis and detailed tables by Jacqueline M. Davis. Graphics were supervised by Stephen L. Sloan. The designer was Patricia A. Vaughan.

Publication of this report would not have been possible without the contributions of numerous staff members throughout the National Center for Health Statistics and several other agencies. These people gave generously of their time and knowledge, providing data from their surveys and programs; their cooperation and assistance are gratefully acknowledged.

Contents

Preface iii
Acknowledgments iv
Guide to Detailed Tables vi
Geographic Divisions of the United States viii

Highlights 1

Chartbook

Introduction 7
Smoking Among Adults 8
Heart Disease Mortality Among Persons 45–64 Years of Age 10
Stroke Mortality Among Persons 55–74 Years of Age 14
Lung Cancer Mortality Among Women 55–74 Years of Age 18
Breast Cancer Mortality Among Women 20
Suicide Among Males 15–24 Years of Age 22
Mesothelioma Mortality Among Men 23
Coal Workers' Pneumoconiosis Mortality Among Men 24
Acute Leukemia Mortality Among Men 26
Bladder Cancer Mortality Among Men 28
Technical Notes 30
Data for Figures 1–29 32

Detailed Tables

List of Detailed Tables 37
Detailed Tables 41

Appendixes

Contents 183
I. Sources and Limitations of Data 185
II. Glossary 199

List of Figures

1. Current smokers among males 20 years of age and over: 1985 8
2. Current smokers among females 20 years of age and over: 1985 9
3. Change in heart disease death rates among white males 45–64 years of age: 1970–85 10
4. Change in heart disease death rates among white females 45–64 years of age: 1970–85 10
5. Heart disease death rates among white males 45–64 years of age: 1983–85 11
6. Heart disease death rates among white females 45–64 years of age: 1983–85 11
7. Change in heart disease death rates among minority males 45–64 years of age: 1970–85 12
8. Change in heart disease death rates among minority females 45–64 years of age: 1970–85 12
9. Heart disease death rates among minority males 45–64 years of age: 1983–85 13
10. Heart disease death rates among minority females 45–64 years of age: 1983–85 13
11. Change in stroke death rates among white males 55–74 years of age: 1970–85 14
12. Change in stroke death rates among white females 55–74 years of age: 1970–85 14
13. Stroke death rates among white males 55–74 years of age: 1983–85 15
14. Stroke death rates among white females 55–74 years of age: 1983–85 15
15. Change in stroke death rates among minority males 55–74 years of age: 1970–85 16
16. Change in stroke death rates among minority females 55–74 years of age: 1970–85 16
17. Stroke death rates among minority males 55–74 years of age: 1983–85 17
18. Stroke death rates among minority females 55–74 years of age: 1983–85 17
19. Change in lung cancer death rates among females 55–74 years of age: 1970–85 18
20. Lung cancer death rates among females 55–74 years of age: 1970–85 19
21. Breast cancer death rates among females 25–44 years of age: 1979–85 20
22. Breast cancer death rates among females 55–74 years of age: 1979–85 21
23. Suicide death rates among males 15–24 years of age: 1979–85 22
24. Mesothelioma death rates among males 25 years of age and over: 1979–85 23
25. Coal workers' pneumoconiosis death rates among males 25 years of age and over: 1979–85 25
26. Males 17 years of age and over employed in mining: 1980 25
27. Acute leukemia death rates among males 25 years of age and over: 1979–85 26
28. Bladder cancer death rates among males 25 years of age and over: 1979–85 28
29. Males 17 years of age and over employed in the printing, rubber, and leather industries: 1980 29

Guide to Detailed Tables

[Numbers refer to table numbers]

Health status and determinants	Age	Sex	Race	Family income	Location of residence	Geographic area: Region	Geographic area: Division, State	Geographic area: International	Other variables
Population, resident	1	1	1						
Fertility and natality									
Birth rates	2		2, 3						3
Completed fertility rate	4		4						4
Lifetime births expected	5		5						6, 7
Live births	6, 7		2, 6, 7				8		
Low birth weight			6–8						
Prenatal care			6, 7						9–11
Abortion	9		9						
Contraception	12		12						
Mortality									
Life expectancy	13	13, 20	13					20	
Infant	14		14, 15				15	19	
Neonatal	14		14, 16				16		
Postneonatal			14, 17				17		
Fetal	14		14, 18				18		
Perinatal			14					19	
All causes	21, 34	21, 22, 34	21, 22, 34						23
Years of potential life lost		23	23						35
Heart disease	24, 36	22, 24	22, 24						35
Cerebrovascular disease	25, 36	22, 25	22, 25						35
Cancer	26, 36	22, 26	22, 26						35
Respiratory cancer	27	22, 27	22, 27						35
Breast cancer	28		22, 28						
Complications of pregnancy	29		29						35
Motor vehicle accident	30	22, 30	22, 30						35
Homicide	31	22, 31	22, 31						35
Suicide	32	22, 32	22, 32						
Occupational disease	33								35
Other causes of death		22	22						
Determinants and measures of health									
Health promotion goals	37								
Childhood vaccination			38		38				39
Diseases, notifiable									
Acquired immunodeficiency syndrome (AIDS)	40–43	40–43	40–43				44, 45		42, 43
Cancer incidence		46	46						46
Cancer survival		47	47						47
Limitation of activity	48	48	48	48	48	48			49
Disability days	49								
Self-assessment of health	50	50	50	50	50	50			
Cigarette smoking	51, 52	51, 52	51						
Alcohol consumption	52	52, 53							
Marijuana use	52	52							
Cocaine	52	52							
Elevated blood pressure	54, 55	54, 55	54, 55						
Elevated serum cholesterol	56	56	56						
Overweight	57	57	57						58
Air pollutants									59, 60
Occupational health and safety									

Utilization of health resources	Age	Sex	Race	Family income	Location of residence	Type of ownership/ organization	Geographic region	Other variables
Ambulatory care								
All physician contacts:								
Place	61	61	61	61	61		61	
Interval since last contact	62	62	62	62	62		62	
Physician's office visits:								
Physician's specialty	63	63	63					64
Visit characteristics	64	64	64				65	
Dentist visits, interval since last visit	65	65	65	65	65			
Outpatient visits in short-stay hospitals						73		

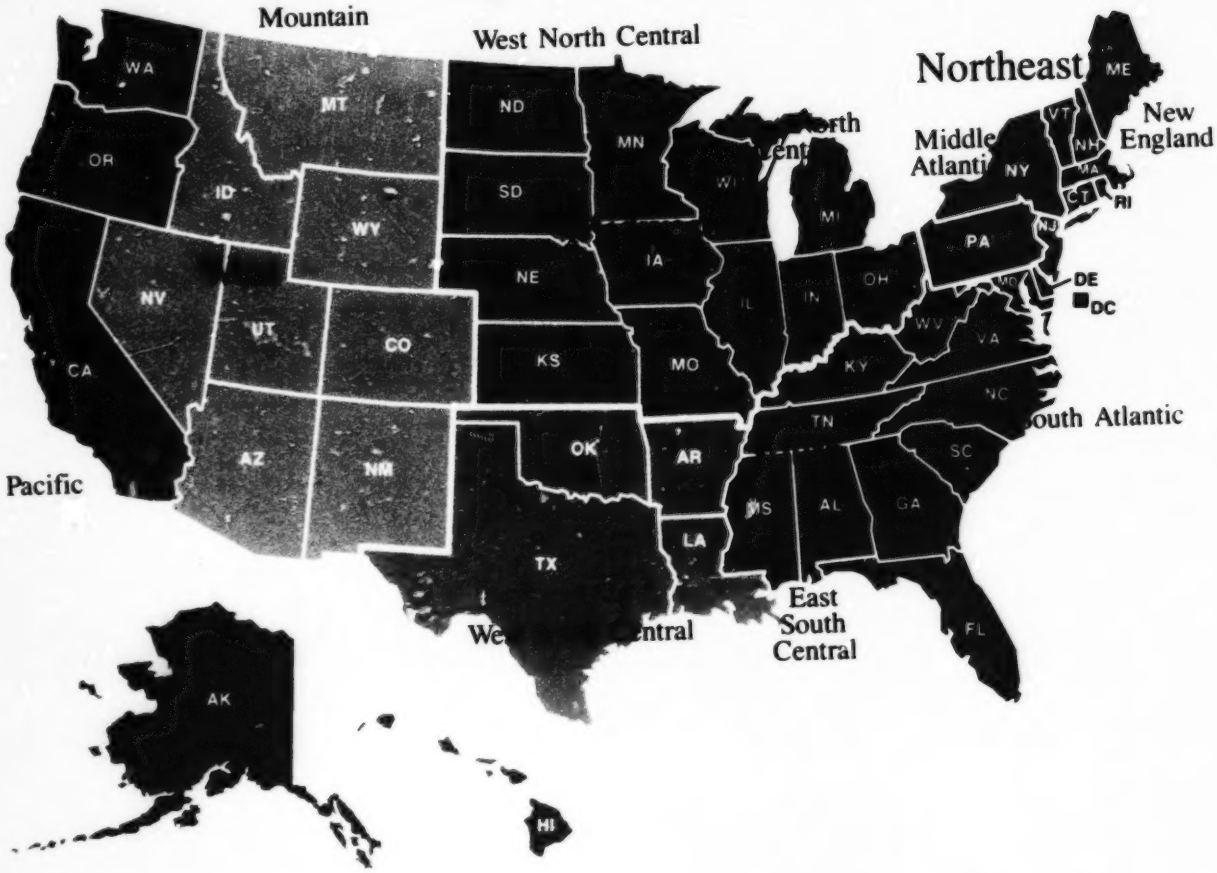
Utilization of health resources	Age	Sex	Race	Family income	Location of residence	Type of ownership/ organization	Geographic region	Other variables
Inpatient care								
Short-stay hospitals:								
Average length of stay	66, 67	66, 67	66	66	66		66, 67	
Diagnosis	68, 70	68, 70						
Discharges	66, 67	66, 67	66	66	66		66, 67	
Diagnosis	68–70	68–70						
Surgery	71	71						
Diagnostic and other nonsurgical procedures	72	72						
Days of care	66, 67	66, 67	66	66	66		66, 67	
Diagnosis	68, 69	68, 69						
Nursing home residents	74, 75	74	74					75
Mental health facilities:								
Admissions	78, 79	78	78			76, 78, 79		76, 79
Patient care episodes						77		

Health care resources	Place of employment	Occupation	Activity/ specialty	Minorities/ women	Geographic area	
					Region	Division, State
Personnel						
Active health personnel	80	84			84	
Physicians			81–83		84	81
Hospital employees		85				
Health professions education:						
Graduates		86				
Schools		86				
Student enrollment		86, 87		87, 88		

Health care resources—Continued	Specialty	Type of ownership/ organization	Beds	Employees	Occupancy	Geographic division, State
Facilities						
Short-stay hospitals		89	89		89	
Long-stay hospitals	90	90	90		90	
Mental health facilities		91	91			
Community hospitals			92	94	93	92–94
Nursing homes			95			95

Health care expenditures	Age	Race	Sex	Type of expenditure	Source of funds or payment	Geographic area		Other variables
						Region	Division, State	
National health expenditures				98, 99	105			96, 97
Gross national product								96, 97
Personal health care				98, 99, 107	106, 107		114–116	100
Consumer Price Index				101–103				
Hospital costs and expenses							115	104
Nursing home charges	109		109		108	109	116	108, 109
Health research and development								111
Human immunodeficiency virus (HIV)								112
Public health				113	113			
Health care coverage	117, 118	117, 118	117, 118			117, 118		117, 118
Health maintenance organizations						119		119
Medicare	121	121	121	120, 122	122	121	122	121, 122
Medicaid				120				123
Veterans medical care				124				
State mental health agencies							125	

Geographic Divisions of the United States



Highlights

Chartbook

- In 1985, the age-adjusted percent of current **cigarette smokers** among men 20 years of age and over ranged from 18 percent in Utah to 41 percent in Alaska. The percent of women who were current smokers ranged from 10 percent in Utah to 34 percent in Nevada. Of the 10 States with the highest percentages of male smokers, 8 are in the South, whereas the States with the highest percentages of female smokers are found in all four regions of the United States (figures 1 and 2).
- Between 1970 and 1985, **heart disease mortality** among persons 45–64 years of age declined substantially in all States. In 1983–85, the highest heart disease death rates among middle-aged white men, minority men, and minority women were in southern States. The highest heart disease death rates among white women were found in four States bordering the Great Lakes and five southern States (figures 3–10).
- Between 1970 and 1985, rapid declines in **stroke mortality** among persons 55–74 years of age occurred in all States. Average annual declines in stroke mortality varied among the States from 4 to 8 percent. In 1983–85, southern States had the highest stroke death rates for persons 55–74 years of age in all four race-sex groups (figures 11–18).
- Between 1970 and 1985, all States experienced increases in **lung cancer** death rates for women 55–74 years of age. Lung cancer was the leading cause of cancer deaths for women 55–74 years of age in only one State in 1970–72. In contrast, by 1983–85 lung cancer was the leading cause of cancer deaths for women in this age group in 41 States. There was a strong positive correlation between State rankings on lung cancer death rates for women in 1983–85 and the 1985 percent of women 55–74 years old who ever smoked (figures 19 and 20).
- In 1979–85, **breast cancer** death rates for premenopausal women (25–44 years of age) were highest in States on the east coast, and lowest in western States. Among postmenopausal women (55–74 years of age) breast cancer death rates were highest in northeastern States and lowest in southern States (figures 21 and 22).
- **Suicide** death rates for males 15–24 years of age vary substantially among the States. In 1979–85, the highest suicide death rates for young males occurred primarily in western States whereas the lowest suicide death rates occurred primarily in the South and Northeast (figure 23).
- Four diseases that may result from **occupational exposures** to toxic substances are mesothelioma, coal workers' pneumoconiosis, acute leukemia, and bladder cancer. Virtually all cases of mesothelioma and coal workers' pneumoconiosis are associated with occupational exposures, and a substantial proportion of acute leukemia and bladder cancer cases are associated with occupational exposures. (figures 24, 25, 27, and 28).
- In 1979–85, age-adjusted death rates for **mesothelioma** among men 25 years of age and over were highest in Washington and New Jersey. The elevated rate in New Jersey may be due to the large number of manufacturing sites that use asbestiform fibers and the shipbuilding and repair industry in that State. Washington had a number of shipbuilding companies during World War II that may account for the elevated rate many years later (figure 24).
- Nearly 67 percent of men who died from **coal workers' pneumoconiosis** during 1979–85 resided in Pennsylvania where the age-adjusted death rate for this disease (16.7 per 100,000 men) was 11 times the national average. States with elevated death rates for coal workers' pneumoconiosis closely correspond to those with a relatively high percentage of the male labor force in mining and are concentrated in the Appalachian and Rocky Mountain areas (figures 25 and 26).
- In 1979–85, age-adjusted death rates for **acute leukemia** among men were elevated in a group of 10 States in the central United States. The elevated death rates for acute leukemia may be due to occupational exposures of farmers or others employed in agricultural industries in many of these States (figure 27).
- Age-adjusted death rates for **bladder cancer** among men are elevated in the heavily industrialized parts of the United States. Seven of the 10 States with the highest age-adjusted bladder cancer death rates for men during 1979–85 are located in the Northeast. Six of the 10 States with the highest percentages of men employed in the printing, rubber, or leather industries also rank highest for bladder cancer mortality (figures 28 and 29).

Detailed Tables

Health Status and Determinants

- In 1986, the **fertility** rate was 65.4 live births per 1,000 women 15–44 years of age. After a decline of 44 percent between 1955 and 1975, the fertility rate has remained stable. However, the birth rate among women 30–39 years of age has been increasing steadily since the late 1970's (tables 2 and 3).
- The proportion of live births to **unmarried mothers** more than doubled between 1970 and 1986, from 11 to 23 percent. Increases have occurred among all race/ethnicity groups, but the proportion of births to unmarried mothers varies substantially by race and ethnicity. In 1986, the proportion ranged from 11 percent for births among Asians and Pacific Islanders to 61 percent for births of black infants. Among Hispanic mothers, the proportion unmarried varied from 16 percent for Cuban births to 53 percent for Puerto Rican births (tables 6 and 7).
- Between 1980 and 1986, the per cent of mothers who received **prenatal care** during the first trimester of pregnancy was essentially unchanged. In 1986, the use of early prenatal care remained substantially greater for white (79 percent) and Asian and Pacific Islander births (76 percent) than for black (62 percent) or American Indian births (61 percent) (table 7). Among Hispanic mothers, use of prenatal care during the first trimester was highest for Cuban mothers (82 percent) and about the same for Puerto Rican and Mexican mothers (57–59 percent) (table 6).
- In 1986, the percentage of live-born **infants weighing less than 2,500 grams** was more than twice as high for black infants (12.5) as for white infants (5.6). These percentages are essentially unchanged since 1980. However, the percentage of live-born infants weighing less than 1,500 grams (those at greatest risk of death and disability) has increased over this period, by 9 percent for black infants and 3 percent for white infants (table 7).

■ Between 1985 and 1986, overall **life expectancy** at birth increased from 74.7 to 74.8 years; more than a full year's increase in life expectancy has occurred since 1980. Provisional data show no change in overall life expectancy between 1986 and 1987. White females continue to have the longest life expectancy (78.8 years) followed by black females (73.8 years), white males (72.1 years), and black males (65.4 years) (table 13).

■ The **infant mortality** rate declined by 2 percent between 1985 and 1986, reaching 10.4 deaths per 1,000 live births. Although the mortality rates for both black and white infants have improved each year, the 1985 and 1986 declines were the smallest since 1965. Furthermore, the black infant mortality rate (18.0) remains twice as high as the rate for white infants (8.9) (table 14).

■ **Years of potential life lost** before age 65 is a measure of premature mortality. In 1986, 12.1 million years of potential life were lost before age 65 in the United States. The leading causes of premature mortality were accidents among males and cancer among females. Among black males the years of potential life lost from homicides was almost as large as from accidents (table 23).

■ Between 1970 and 1986, the age-adjusted death rate for **heart disease**, the leading cause of death, declined by 31 percent. Declines were greater among white males (32 percent), white females (29 percent), and black females (26 percent) than among black males (22 percent) (table 24).

■ The age-adjusted death rate for **stroke**, the third leading cause of death in the United States, declined by 53 percent between 1970 and 1986. Sharp declines have occurred for both sexes and both major race groups, ranging from 52 percent for white females to 56 percent for black females. However, in 1986 the age-adjusted death rate for stroke was 89 percent higher for black males than white males and 76 percent higher for black females than white females (table 25).

■ In contrast to the declines in heart disease and stroke mortality, the age-adjusted death rate for **lung cancer** increased between 1970 and 1986. Among males, the rate rose slowly between 1970 and 1980 but has been fairly stable since 1980. Among females, however, the lung cancer death rate almost doubled between 1970 and 1980 and continued to increase through 1986 (table 27).

■ Between 1986 and 1987, cases of early infectious **syphilis** (primary and secondary stages) reported by State health departments increased 26 percent to 35 thousand. During the same period **gonorrhea** cases declined by 13 percent to 781 thousand (table 39).

■ Of the 77,883 **AIDS** cases reported in the United States as of November 30, 1988, 90 percent occurred among adult or adolescent men, 8 percent among adult or adolescent women, and 2 percent among children under 13 years of age. Among men, the largest proportion of cases involve non-Hispanic white men (62 percent). In contrast, AIDS cases among women and children are predominately among black persons (54 percent and 55 percent, respectively) (table 40).

■ Among adult and adolescent men, homosexual and bisexual men comprise the largest **human immunodeficiency virus (HIV)** transmission category, accounting for 69 percent of cases reported as of June 30, 1988. Intravenous drug users account for 16 percent of cases among men, and men who are both homosexual and intravenous drug users account for an additional 8 percent of cases. Among women, the largest HIV transmission categories involve intravenous drug use (52 percent) and heterosexual contact (25 percent) (table 42).

■ Almost half of the **AIDS** cases reported in the United States as of November 30, 1988, occurred among residents of New York (25 percent) or California (21 percent). Other States with large numbers of AIDS cases are Florida (7 percent), Texas (7 percent), New Jersey (7 percent), Illinois (3 percent), and Pennsylvania (3 percent) (table 44).

■ Between 1983 and 1987, **cigarette smoking** continued to decline steadily. The age-adjusted percent of men 20 years of age and over who smoke cigarettes declined from 35 percent in 1983 to 32 percent in 1987; smoking among women decreased from 30 percent in 1983 to 27 percent in 1987 (table 51).

■ In 1985, **cocaine use** during the previous month was reported by 7.6 percent of young adults 18–25 years and 1.7 percent of youths 12–17 years. Young male adults were more likely than their female counterparts to report cocaine use (9 percent versus 6 percent). Between 1982 and 1985, the percentage of youths and young adults who reported using cocaine remained about the same (table 52).

■ Between 1985 and 1986, **lead emissions** declined by almost 60 percent from 21 thousand to 9 thousand metric tons per year in large part because of Environmental Protection Agency rules requiring petroleum refineries to lower the lead content of gasoline (table 58).

Utilization of Health Resources

■ Between 1983 and 1987, the average number of ambulatory **physician contacts** for persons 65 years of age and over increased by 17 percent from 7.6 to 8.9 contacts per person per year. During this period the average number of visits increased 10 percent among persons 45–64 years of age while remaining fairly stable for younger persons (table 61).

■ Non-Federal short-stay **hospital use** as measured by days of care per 1,000 population declined by 8 percent between 1985 and 1987. In contrast, days of care per 1,000 population declined by 18 percent between 1983 and 1985, the time period immediately after implementation of the diagnostic-related groups (DRG) prospective payment system. The decline in short-stay hospital use between 1983 and 1985 was due to both shorter hospital stays as well as a decline in the hospital discharge rate, whereas the decline in hospital use between 1985 and 1987 primarily reflected a decline in the hospital discharge rate (table 67).

■ **Average length of stay** in non-Federal short-stay hospitals has been declining since 1980, with a period of more rapid decline associated with DRG implementation. Between 1983 and 1985, age-adjusted average length of stay declined by 6 percent from 6.8 to 6.4 days compared with a 2-percent decline between 1985 and 1987. Average length of stay among persons 65 years of age and over declined by a full day between 1983 and 1985. Since 1985, the declines in average length of stay have been minimal for all persons including those 65 years and over (table 67).

■ Between 1984 and 1987, the total number of persons discharged from non-Federal short-stay hospitals with

the diagnosis of **AIDS** increased fivefold from 10 thousand to 50 thousand. During the same time period, the number of days of care for AIDS patients increased more than sixfold from 123 thousand to 782 thousand. In 1987, the average length of stay for persons with a diagnosis of AIDS was almost 16 days compared to about 6 days for all discharges (table 68).

- Between 1980 and 1987, inpatient **cardiac catheterization** more than doubled among men and women 45–64 years of age, tripled among men 65 years and over, and increased almost fourfold among women 65 years and over. In 1987, cardiac catheterization and coronary bypass surgery were the two most frequently performed operations among men 45–64 years of age (table 71).
- The proportion of births delivered by **Cesarean section** has been increasing since 1980. However, the rate of increase is beginning to slow. In 1987, 24.4 percent of all deliveries wereCesarean compared to 24.1 percent in 1986, 22.7 percent in 1985, and 16.5 percent in 1980 (table 71).
- Between 1985 and 1986, the total number of **outpatient visits** in short-stay hospitals increased by 5 percent from 273 million to 285 million. The number of outpatient visits in proprietary hospitals increased 20 percent from 12 million to almost 15 million while visits in non-Federal nonprofit hospitals increased 5 percent from 160 million to 168 million (table 73).

Health Care Resources

- In 1987, 8.5 million persons were employed in the **health service industry**. Throughout the period 1980–87 the health service industry accounted for about 7 percent of total employment with about half of all health service industry workers employed in hospitals, 16 percent employed in nursing homes, and 11 percent employed in physicians offices (table 80).
- **Physician supply** continues to vary among geographic divisions of the United States. In 1986, the number of active non-Federal physicians per 10,000 population was highest in the New England and Middle Atlantic divisions (27 per 10,000), and lowest in the East and West South Central divisions (15 and 17 per 10,000) (table 81).
- In 1986, 21 percent of professionally active doctors of medicine were educated in schools outside the United States or Canada. The proportion of professionally active doctors with **foreign medical educations** has remained constant since 1980 (table 83).
- In 1986, 3.1 million full-time equivalent **hospital personnel** were employed in community hospitals. Between 1984 and 1986, total full-time equivalent employment remained constant; however, the number of registered nurses employed increased 6 percent to 736 thousand, licensed practical nurses fell 15 percent to 174 thousand, and ancillary nursing personnel declined 12 percent to 227 thousand (table 85).
- During the 1980's, **first-year enrollments** in nursing and dental schools have declined substantially. The number of first-year registered nurse enrollees increased gradually in the early 1980's and then fell 26 percent between 1984 and 1987. The number of first-year dental students declined 26 percent between 1980 and 1987 (table 86).
- During the past decade, the proportion of **women enrolled** in schools for the health professions traditionally dominated by men increased substantially. In 1986–87, women constituted 35 percent of first-year students in medical schools, 30 percent in dental schools, and more than half of first-year students in pharmacy and veterinary schools (table 87).
- During academic year 1986–87, **minority enrollment** accounted for 19 percent of total enrollment in medical schools compared with 11 percent during academic year 1977–78. The proportion of black students remained constant at 6 percent of total enrollment in both years, and the proportion of Asian students increased from 2 percent to 7 percent over this period (table 88).
- The total number of short-stay **hospital beds** remained stable at 1.1 million between 1980 and 1986. However, during this period State and local government beds declined 13 percent from 212 thousand to 185 thousand while proprietary hospital beds increased 23 percent from 87 thousand to 107 thousand (table 89).
- There were 157 thousand long-term **psychiatric hospital beds** in 1986, down 71 percent from 1970. In 1986, the occupancy rate for psychiatric beds was 87 percent (table 90).
- Between 1980 and 1986, the number of **full-time equivalent employees** (FTE's) per 100 average daily patients in community hospitals increased 3.8 percent per year. In 1986, 492 FTE's care for 100 average daily patients in community hospitals, with the highest number of FTE's in the Pacific and New England divisions (564 and 563, respectively) and the fewest in the East South Central division (420) (table 94).

Health Care Expenditures

- In 1986, **national health care** expenditures in the United States totaled $458 billion, an average of $1,837 per person. Hospital care continues to claim the largest share of health care dollars, accounting for 39 percent of health care expenditures in 1986. Physician services have accounted for about one-fifth of expenditures since 1950. Nursing home care has increased its share of the total from 1.5 percent in 1950 to just over 8 percent in 1986 (tables 96 and 98).
- In 1986, the United States spent 11 percent of its **gross domestic product** (GDP) on health, compared with 9 percent in Sweden, 8.5 percent in Canada and France, 8 percent in Germany, 7 percent in Japan, and 6 percent in the United Kingdom. From 1980 to 1986, the health share of GDP remained fairly stable in most industrialized countries, while increasing by about one-fifth in the United States, thereby widening the gap between the health expenditures of the United States and those of other countries (table 97).
- In 1987, the rate of increase in the medical care component of the **Consumer Price Index** (CPI) was 6.6 percent, slightly lower than that of the previous year (7.5 percent) but higher than the 1987 overall inflation rate of 3.7 percent. The lowest rates of increase among medical care items were for nonprescription drugs (5 percent) and medical supplies (4 percent), whereas the highest rate of increase was for prescription drugs (8 percent) (tables 101 and 103).
- Between 1985 and 1986, **hospital expenses** per inpatient day rose 8.5 percent to $499, and hospital expenses per inpatient stay increased 9.0 percent to $3,530. Hospital expenses per inpatient day had increased at double-digit rates every year from 1974 to 1985, and expenses per stay had double-digit increases through 1983 (table 104).

■ Since the advent of the Medicare and Medicaid programs in the mid-1960's, the **Federal Government's share** of personal health care expenditures has increased from 10 percent in 1965 to 27 percent in 1975. Its share has increased more slowly since 1975 to 30 percent in 1986 (table 106).

■ Expenditures for **HIV-related activities** by the Public Health Service (PHS) rose from $5.6 million in 1982 to $502.4 million in 1987. The National Institutes of Health (NIH) accounted for 52 percent of the expenditures in 1987. The National Institutes of Allergy and Infectious Disease accounted for 56 percent of NIH expenditures and the National Cancer Institute for 24 percent. Other PHS agencies with major HIV-related expenditures in 1987 included the Centers for Disease Control with 27 percent of the total and the Alcohol, Drug Abuse and Mental Health Administration with 9 percent (table 112).

■ Between 1976 and 1984, **public health** expenditures by State and territorial health agencies for the Supplemental Food Program for Women, Infants, and Children (WIC) increased an average of 32 percent per year, whereas expenditures for other public health programs increased an average of 10 percent per year. Between 1984 and 1986, average annual increases in WIC expenditures have been about the same as for other public health expenditures (9–10 percent) (table 113).

■ Between 1976 and 1987, the number of **health maintenance organizations** (HMO) increased from 174 to 647, and enrollment rose from 6 million to 29 million. HMO enrollment grew at an average annual rate of 10 percent from 1976 to 1982 compared with 25 percent from 1982 to 1985. Average annual enrollment growth slowed in the last 2 years to 18 percent. In 1987, enrollment per 1,000 population continued to be highest in the West (206 per 1,000 population) and lowest in the South (64 per 1,000 population). Individual practice associations account for an increasingly large proportion of HMO enrollees, 41 percent in 1987 compared with 7 percent in 1976 (table 119).

■ In 1986, 28.2 million people 65 years of age and over were enrolled in **Medicare**. Persons served per 1,000 enrollees nearly doubled between 1967 and 1986 to 732 per 1,000 enrollees. In 1986, the number of persons served per 1,000 enrollees was higher for white persons than other races (738 versus 683) and higher for women than men (759 versus 691) (table 121).

■ In 1986, **Medicare** funds reimbursed an average of $2,870 per person served. Reimbursements per person served were lower for white persons than for persons of other races and were lower for females than for males (table 121).

■ During the period 1980–86, **Medicare** enrollees in Pacific division States had the highest supplementary medical insurance benefit payment per enrollee, $1,144 in 1986 compared with the United States average of $863. Medicare enrollees in New England, Middle Atlantic, East North Central and Pacific divisions had the highest hospital insurance benefit payments over the period 1980–86 compared to the other five geographic divisions. The high hospital insurance benefit payments in the Pacific division can be attributed to high hospital charges per day, whereas those in other divisions are related primarily to long hospital stays (table 122).

■ **Veterans' medical care** expenditures increased by 4 percent from 1986 to 1987. Inpatient hospital care continued to account for a smaller percent of expenditures, falling from 82 percent in 1965 to 56 percent in 1987. Outpatient care, nursing home care, and other types of care continued to show small increases in the numbers of patients treated and the proportions of expenditures for which they accounted (table 124).

■ In 1985, per capita expenditures by **State mental health agencies** for mental health services ranged from $10.51 in Iowa to $90.12 in New York, with about 70 percent of States having expenditures between $20 and $40. Higher per capita expenditures were concentrated among States in the Northeast. The relative rank of the States varied only slightly from 1981 to 1985 (table 125).

Chartbook

Introduction

Which areas of the United States have the highest death rates and which have the lowest? Are recent trends in mortality the same for all areas of the country? This chartbook addresses these questions through 29 maps of the United States illustrating State rankings on mortality for several leading causes of death and selected occupation-related causes of death and for selected risk factors. Text accompanying the maps provides background information on each topic and highlights States and clusters of States that rank at the top or bottom on each statistic. At the end of the chartbook technical notes describe data sources and statistical methods, and the data used to generate each map are presented in a table. Only estimates that meet reliability criteria described in the technical notes are presented in the chartbook. Thus, the number of States for which data are shown in the maps varies with the topic and population subgroup being considered, ranging from 26 to 51 (including the District of Columbia). Four categories of States are shown in each map. States ranking in the lowest and highest quintiles of States form the first and fourth categories, respectively; the remaining States are split into two middle categories. Further details are given in the technical notes.

The first two maps present the proportions of adult men and women who smoked cigarettes in 1985. Cigarette smokers are at elevated risk of death from several of the diseases presented in subsequent maps, heart disease, stroke, lung cancer, and bladder cancer.

Figures 3–10 present data on heart disease mortality among persons 45–64 years of age. Separate maps are shown for white men and women and men and women of other races (subsequently referred to as minority races). Four race-sex specific maps (figures 3, 4, 7, 8) identify those States with the most rapid and least rapid declines in heart disease mortality over the period 1970–85. The other four maps in this section (figures 5, 6, 9, 10) identify States and areas of the country with the highest and lowest heart disease death rates during 1983–85 for each of the four race-sex groups. Because of the relatively small minority population in many States, fewer States meet the reliability criteria for the minority than the white population. In most States for which heart disease data for the minority population are presented, the minority population was more than 80-percent black in 1980. However, in 1980, Asian and Pacific Islanders constituted about 95 percent of the minority population in Hawaii, almost 40 percent in California and Washington, and 20 percent in Colorado. American Indians comprised about 60 percent of the 1980 minority population in Arizona, almost 40 percent in Oklahoma, and about 20 percent in Washington. Figures 11–18 present comparable race-sex specific data for stroke mortality among persons 55–74 years of age.

Figures 19 and 20 illustrate State variation in lung cancer mortality among women 55–74 years of age. Lung cancer has been increasing rapidly among women and has recently overtaken breast cancer as the leading cause of cancer deaths among women in this age group. Figure 19 ranks States according to how rapidly lung cancer death rates have increased over the 16-year period 1970–85, and figure 20 ranks States according to their lung cancer death rates during 1983–85.

Figures 21 and 22 present State rankings on death rates during 1979–85 for breast cancer, a leading cause of cancer deaths among women. Separate maps are shown for women who are premenopausal (25–44 years of age) and postmenopausal (55–74 years of age).

Figure 23 presents State rankings on death rates during 1979–85 for suicide among males 15–24 years of age. Suicide is the second leading cause of death in this age group and is much more common among young males than females.

Figures 24–29 present data concerning four diseases that may result from occupational exposures to toxic substances. The four diseases were selected from a list of conditions known as "sentinel health events (occupational)" (Rutstein et al., 1983). They are defined as unnecessary diseases, disabilities, and deaths that are occupation related. Some of these diseases occur only among persons with occupational exposures, whereas others may also occur among persons without occupational exposures. Figures 24 and 25 present male death rates during 1979–85 for mesothelioma and coal workers' pneumoconiosis, diseases that are inherently occupational. Figures 27 and 28 present male death rates during 1979–85 for acute lymphoid and myeloid leukemias and bladder cancer, diseases for which substantial proportions of cases may result from occupational exposures. This section also includes two maps that illustrate State variation in the percent of men employed in selected occupations where toxic exposures are likely to occur. Figure 26 displays the percent of men employed in mining, and figure 29 displays the percent employed in the printing, rubber, and leather industries.

Reference

Rutstein, D. D., R. J. Mullan, T. M. Frazier, W. E. Halperin, J. M. Melius, and J. P. Sestito. 1983. Sentinel health events (occupational): A basis for physician recognition and public health surveillance. *Am J Public Health* 73:1054–1062.

Smoking Among Adults

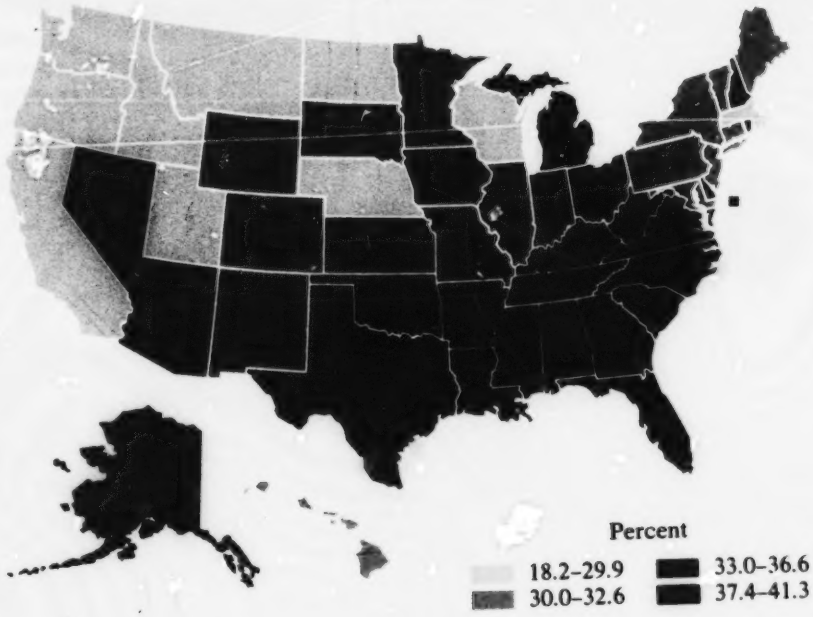
Background

Cigarette smoking is the single factor responsible for the most preventable deaths in our society. The largest numbers of excess deaths among cigarette smokers are due to coronary heart disease, lung cancer, and chronic obstructive lung disease. Cigarette smoking also increases the risk of death from other cardiovascular diseases and cancers of the larynx, the upper digestive system, bladder, pancreas, and kidney (U.S. DHEW, 1979).

The risk of death among smokers increases with the amount smoked, the duration of cigarette smoking, and the tar and nicotine content of the cigarette. The risk of death is also greater among smokers who began smoking at younger ages compared with those who began later and among smokers who inhale compared to those who do not. Cessation of cigarette smoking reduces the risk of mortality associated with smoking (U.S. DHEW, 1979).

Since the release in 1964 of the first *Surgeon General's Report on the Health Consequences of Smoking*, the smoking behavior of the U.S. population has changed dramatically. Between 1965 and 1985 the age-adjusted percent of men who were current smokers dropped from 52 to 33 percent. During the same period, the percent of women who were current smokers dropped from 34 to 28 percent (NCHS, 1988). In 1985, black men were more likely to be current smokers than white men (41 versus 32 percent), and black women were slightly more likely than white women to smoke (32 versus 28 percent) (NCHS, 1988).

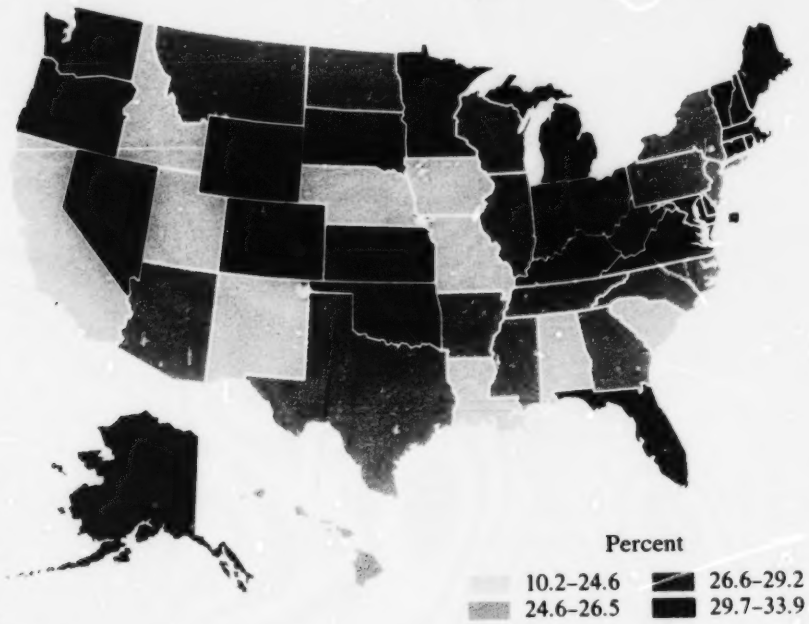
1. Current smokers among males 20 years of age and over: 1985



NOTE: Percents are age adjusted.

SOURCE: U.S. Bureau of the Census: 1985 Current Population Survey.

2. Current smokers among females 20 years of age and over: 1985



NOTE: Percents are age adjusted.

SOURCE: U.S. Bureau of the Census: 1985 Current Population Survey.

Geographic Variation

■ The percent of adults who smoke varies substantially among the States. In 1985, the age-adjusted percent of men 20 years of age and over who were current smokers ranged from 18 percent in Utah to 41 percent in Alaska (figure 1). The percent of women who were current smokers ranged from 10 percent in Utah to 34 percent in Nevada (figure 2). The percent of adults who smoke in Utah was substantially lower than in any other State. The next lowest percent for men was in Montana where 26 percent of men smoke cigarettes; and the next lowest percent for women was in South Carolina where 22 percent of women smoke cigarettes.

■ Of the 10 States with the highest percentages of men who smoke, 8 are in the South; 6 of the 10 States with the lowest percentages of male smokers are in the West (Utah, Montana, Idaho, Oregon, California, Washington) and 3 are in the Midwest (Nebraska, Wisconsin, North Dakota).

■ There was little correlation between State rankings on smoking for men and women ($r = .32$). The States with the highest percentages of women who smoke are found in all four regions of the United States, and the States with the lowest percentages of female smokers are split among three regions of the country (West, Midwest, South). Nevertheless, three States with among the highest proportions of male smokers also had high proportions of female smokers (Nevada, Kentucky, West Virginia); and four States with among the lowest proportions of male smokers (Utah, Idaho, California, Nebraska) were also among the States with the lowest percentages of female smokers.

References

National Center for Health Statistics. 1988. *Health, United States, 1987.* DHHS Pub. No. (PHS) 88-1232 Public Health Service. Washington. U.S. Government Printing Office.

U.S. Department of Health, Education, and Welfare. 1979. *A Report of the Surgeon General. Smoking and Health.* DHEW Pub. No. (PHS) 79-50066. Washington. U.S. Government Printing Office.

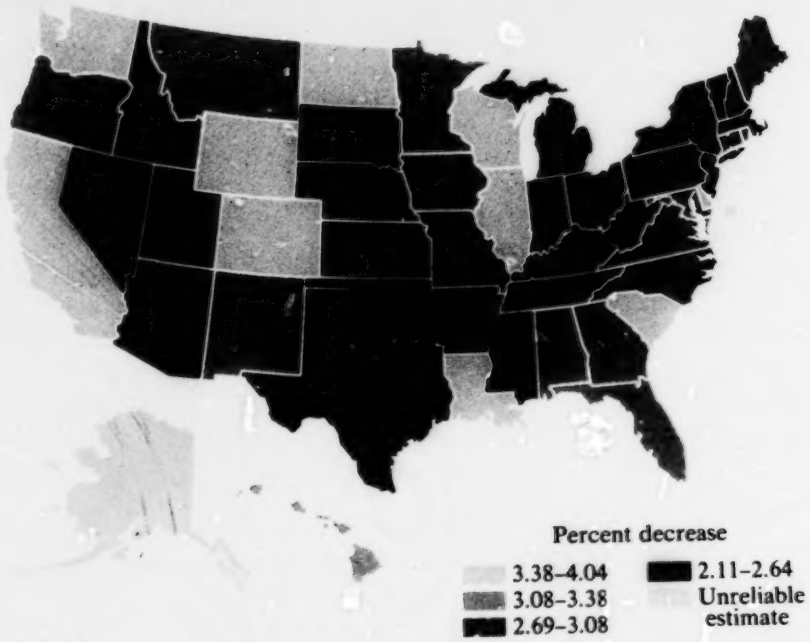
Heart Disease Mortality Among Persons 45–64 Years of Age

Background

Heart disease is the second leading cause of death among middle-aged persons (45–64 years of age) in the United States with a death rate of 269 per 100,000 in 1985, just below that for all cancers (283 per 100,000). Heart disease accounted for one-third of all deaths in this age group in 1985. Between 1970 and 1985, heart disease death rates among middle-aged persons have declined by about 3 percent per year for white men and minority women. The decline has been less rapid for white women and minority men (2 percent per year). Possible reasons for the decline in heart disease mortality include increased control of elevated blood pressure, smoking cessation, dietary changes, reduced serum cholesterol levels, and improvements in medical care (Stamler, 1985). Substantial geographic variation in the trends for heart disease mortality has been noted by several researchers (Davis et al., 1985; Wing et al., 1986; Ragland et al., 1988).

Throughout the period 1970–85 heart disease death rates have been lower for women than men and lower for white than minority persons. In 1983–85, among middle-aged persons the heart disease death rate was 29 percent higher for minority men than white men (523 versus 404 deaths per 100,000) and was twice as high for minority women as for white women (268 versus 132 deaths per 100,000). Among the white population, the heart disease death rate for men was three times as large as for women, and among persons of minority races, the rate for men was twice as large as for women.

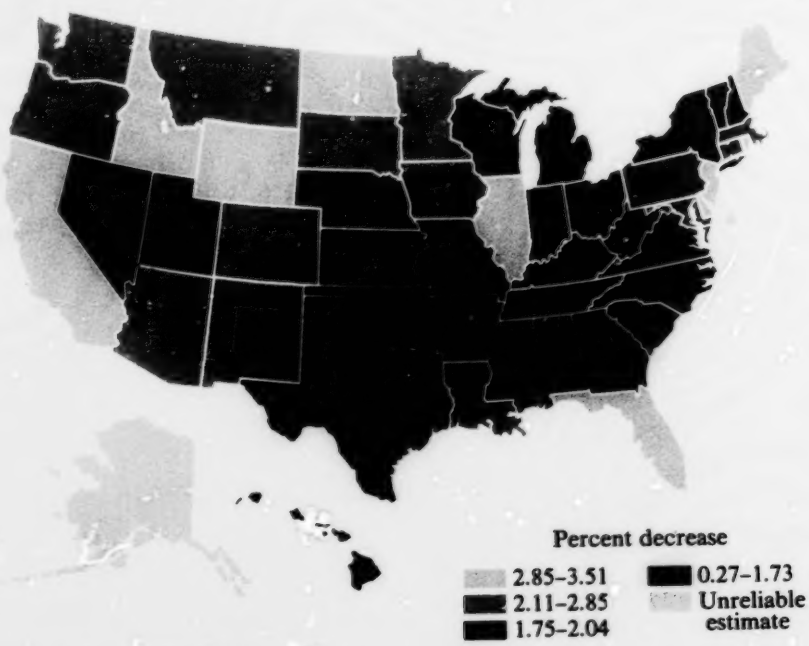
3. Change in heart disease death rates among white males 45–64 years of age: 1970–85



NOTE: Rates are age adjusted.

SOURCE: National Center for Health Statistics: Data from the Compressed Mortality File.

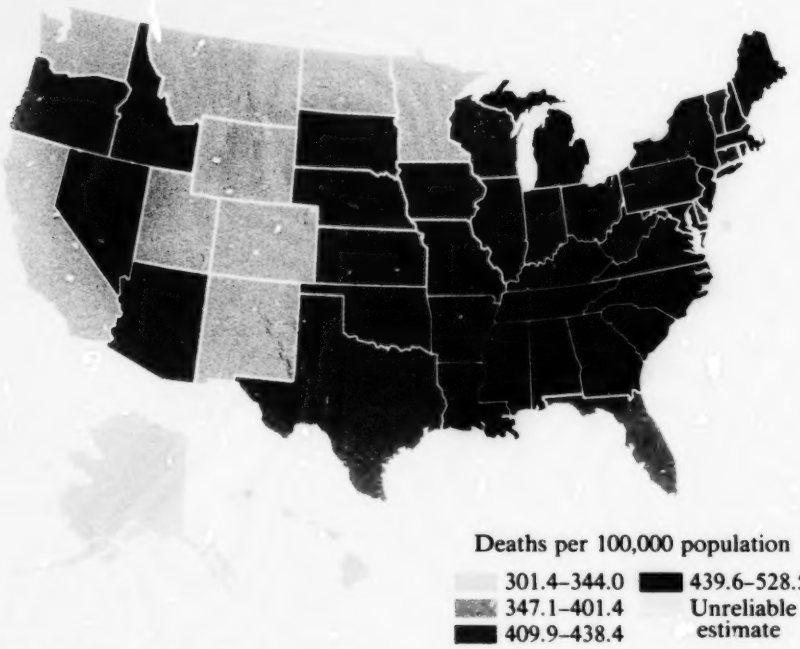
4. Change in heart disease death rates among white females 45–64 years of age: 1970–85



NOTE: Rates are age adjusted.

SOURCE: National Center for Health Statistics: Data from the Compressed Mortality File.

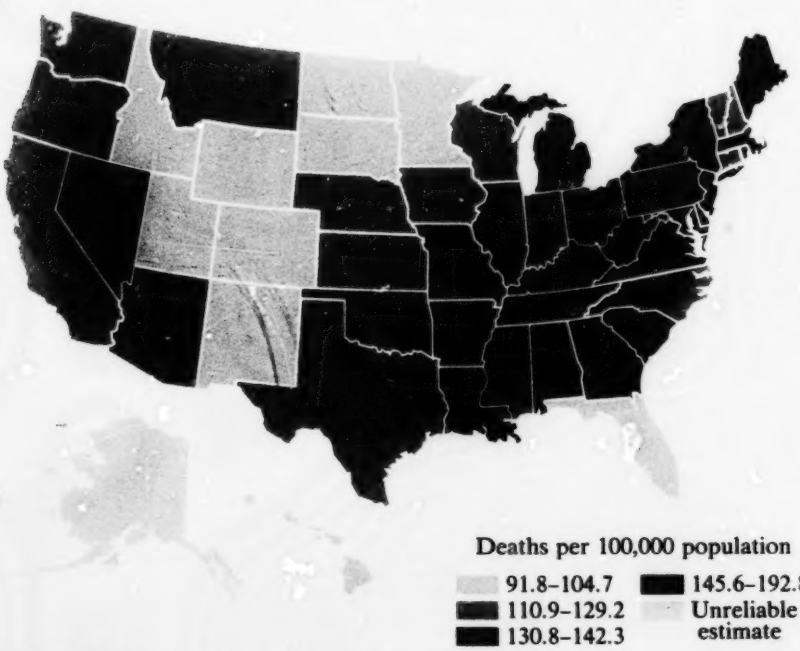
5. Heart disease death rates among white males 45–64 years of age: 1983–85



NOTE: Rates are age adjusted.

SOURCE: National Center for Health Statistics: Data from the Compressed Mortality File.

6. Heart disease death rates among white females 45–64 years of age: 1983–85



NOTE: Rates are age adjusted.

SOURCE: National Center for Health Statistics: Data from the Compressed Mortality File.

Geographic Variation

■ Between 1970 and 1985, average annual percent declines in heart disease death rates varied among the States from 2.1 to 4.0 percent for white men (figure 3) and from 0.3 to 3.5 percent for white women (figure 4). South Dakota and Nevada experienced the least rapid annual declines for white men; Mississippi and Arkansas had the slowest annual declines for white women. Five of the 10 States with the least rapid declines for white men are in the South, as are 7 of the 10 States with the slowest declines for white women. Wyoming and Delaware experienced the most rapid annual declines in heart disease mortality for white men; Maine and Wyoming had the most rapid declines for white women. Other States with the most rapid declines were split among three regions of the country (West, Midwest, South) for white men and all four regions of the country for white women.

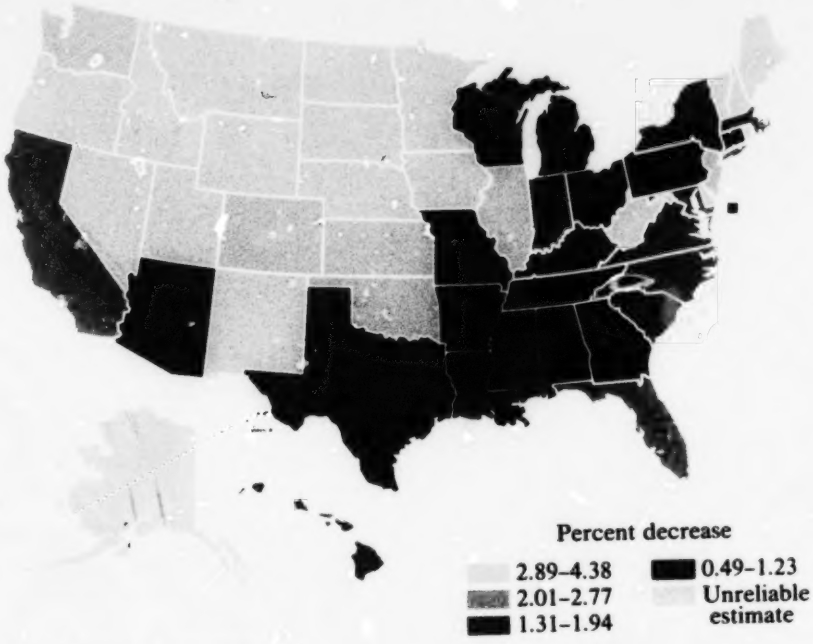
■ In 1983–85, among middle-aged white persons heart disease death rates per 100,000 population varied among the States from 301 to 528 for men and from 92 to 193 for women. Nine of the 10 States with the highest heart disease death rates for white men are in the South (figure 5). Four of these States also have among the least rapid annual declines during 1970–85 (West Virginia, Kentucky, Mississippi, Arkansas), and two of these States have among the most rapid annual declines (South Carolina, Louisiana). The highest heart disease death rates for white women were concentrated in four States bordering the Great Lakes and five southern States (figure 6). Most of the States with the lowest heart disease death rates for both middle-aged white men and women are in the West.

■ Heart disease death rates vary considerably among different racial groups. In 1979–81, among middle-aged men heart disease death rates were estimated at 656 deaths per 100,000 for the black population, 466 for whites, 327 for American Indians, and 207 for Asian and Pacific Islanders. Among middle-aged women the comparable heart disease death rates were 332 for blacks, 145 for whites, 121 for American Indians, and 62 for Asian and Pacific Islanders. Thus, heart disease death rates for minority

men and women within each State depend upon the State's racial distribution. Although the minority population is predominately black in most States, Asian and Pacific Islanders constitute a substantial proportion of the minority population in Hawaii, California, Washington, and Colorado. American Indians comprise a substantial percent of the minority population in Arizona, Oklahoma, and Washington.

- Among the 32 States with data shown for the middle-aged minority population, the average declines in heart disease death rates between 1970 and 1985 ranged from 0.5 to 4.4 percent per year for men and from 1.2 to 4.6 percent per year for women. Alabama and Mississippi experienced the slowest annual declines for minority men; Mississippi and Arizona had the slowest annual declines for minority women. Four of the six States with the slowest declines for minority men are in the South (figure 7). The six States with the slowest declines for middle-aged minority women are not concentrated in any particular region of the country (figure 8). Kansas and Illinois experienced the most rapid declines for minority men, whereas New Jersey and Illinois had the fastest declines for minority women.
- In 1983–85, among middle-aged minority persons heart disease death rates ranged from 267 to 669 deaths per 100,000 for men and from 130 to 387 deaths per 100,000 for women. The six States with the highest heart disease death rates for minority men are in the South (figure 9), as are five of the six States with the highest rates for minority women (figure 10). The lowest heart disease death rates for minority men and women are found in the West (Hawaii, Arizona, Colorado, Washington, California). The relatively large proportions of minorities other than black among the minority populations in these States probably account at least partially for their low heart disease death rates. Hawaii, where 95 percent of the minority population is Asian and Pacific Islander, has the lowest heart disease death rate for minority men and minority women. In fact, the rate for minority men in Hawaii is lower than any State rate for white men.
- State rankings on 1983–85 heart disease death rates for minority men are highly correlated with those for minority women ($r = .91$), as are

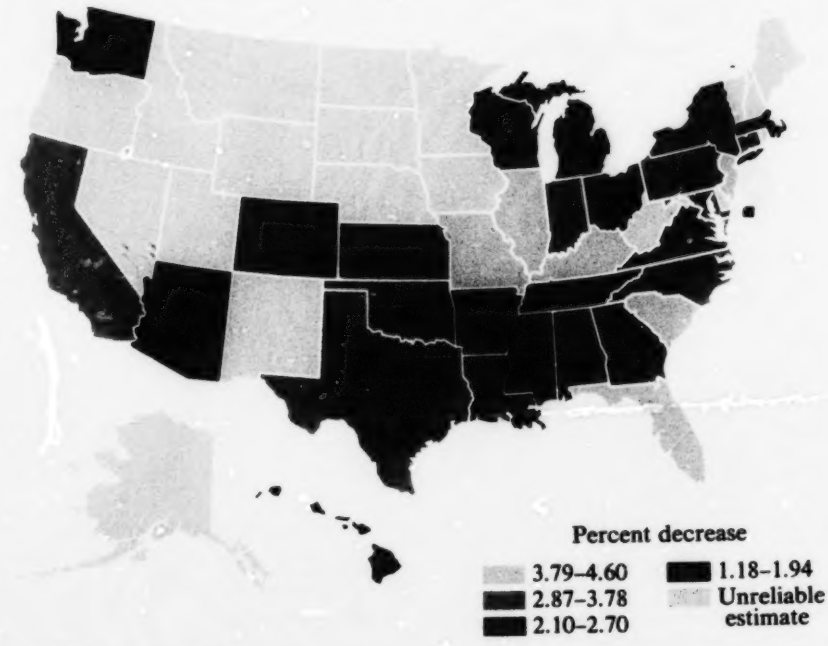
7. Change in heart disease death rates among minority males 45–64 years of age: 1970–85



NOTE: Rates are age adjusted.

SOURCE: National Center for Health Statistics: Data from the Compressed Mortality File.

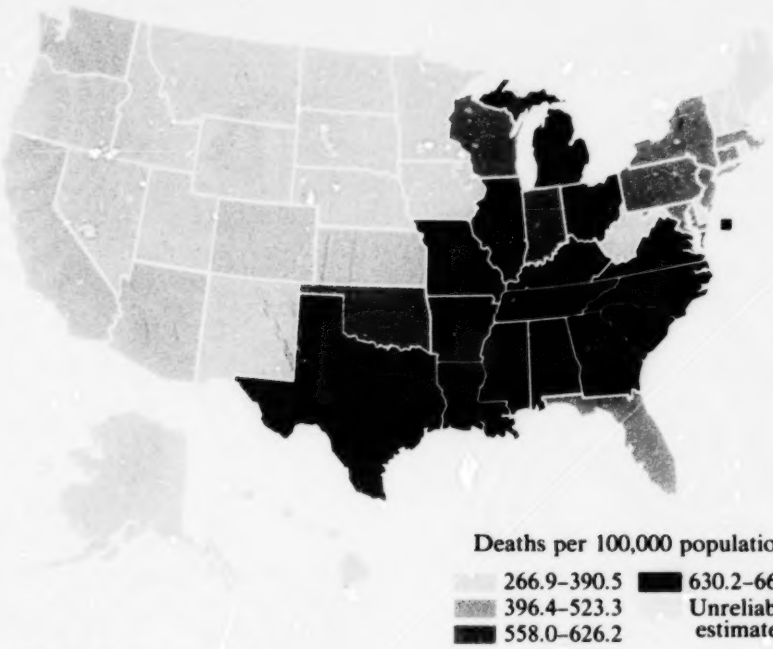
8. Change in heart disease death rates among minority females 45–64 years of age: 1970–85



NOTE: Rates are age adjusted.

SOURCE: National Center for Health Statistics: Data from the Compressed Mortality File.

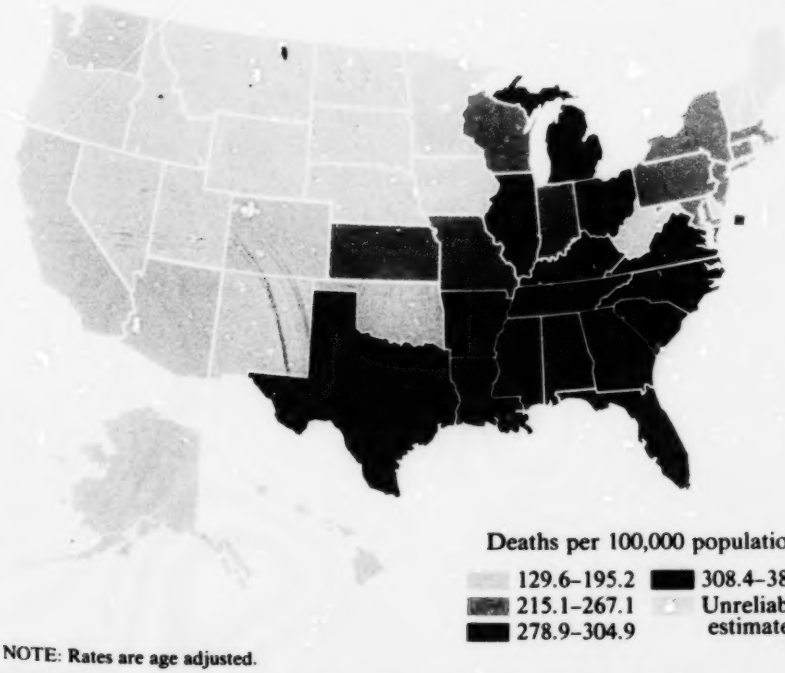
9. Heart disease death rates among minority males 45–64 years of age: 1983–85



NOTE: Rates are age adjusted.

SOURCE: National Center for Health Statistics: Data from the Compressed Mortality File.

10. Heart disease death rates among minority females 45–64 years of age: 1983–85



NOTE: Rates are age adjusted.

SOURCE: National Center for Health Statistics: Data from the Compressed Mortality File.

rankings on heart disease death rates for white men and women (r = .89). State rankings on average annual declines in heart disease mortality for men and women of each racial group are less correlated (r = .45 and r = .51, respectively).

- There is a moderate tendency for States that ranked high on heart disease death rates for minority women during 1970–72 also to have the most rapid declines in heart disease death rates for minority women during 1970–85 (r = .62). No correlation exists between State rankings on heart disease death rates in 1970–72 and rankings on subsequent changes in the death rates for minority men or white persons of either sex (r = .02–.26).
- State variation in heart disease risk factors, medical care, and socioeconomic factors may explain some of the State variation in heart disease mortality. Additional research is needed to understand more fully the reasons for the large State differentials in heart disease mortality.

References

Davis, W. B., C. G. Hayes, M. Knowles, W. B. Riggan, J. Van Bruggen, and H. A. Tyroler. 1985. Geographic variation in declining ischemic heart disease mortality in the United States, 1968–1978. *Am J Epidemiol* 122:657–672.

Ragland, K. E., S. Selvin, and D. W. Merrill. 1988. The onset of decline in ischemic heart disease mortality in the United States. *Am J Epidemiol* 127:516–531.

Stamler, J. 1985. The marked decline in coronary heart disease mortality rates in the United States, 1968–1981; a summary of findings and possible explanations. *Cardiology* 72:11–22.

Wing S., C. Hayes, G. Heiss, E. John, M. Knowles, W. B. Riggan, and H. A. Tyroler. 1986. Geographic variation in the onset of ischemic heart disease mortality in the United States. *Am J Public Health* 76:1404–1408.

Stroke Mortality Among Persons 55–74 Years of Age

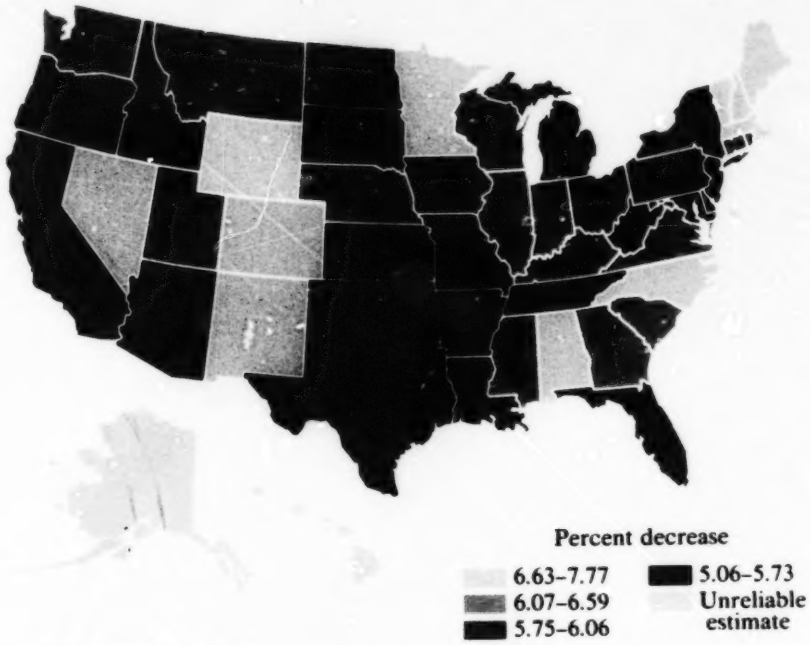
Background

Cerebrovascular disease (stroke) is the third leading cause of death (following heart disease and cancer) among Americans 55–74 years of age, accounting for 5 percent of all deaths in this age group in 1985. Since 1970 stroke mortality has declined by more than 50 percent. Improvements in hypertension detection and control during the 1970's have probably contributed to this decline (NCHS, 1986). In addition to hypertension, other known risk factors for stroke include diabetes, cardiac impairment, elevated blood lipids, obesity, and cigarette smoking. (Kuller, 1978; Wolf et al., 1983).

Declines in stroke mortality between 1970 and 1985 have been rapid for men and women of white and minority races. Among persons 55–74 years of age the average annual declines in stroke death rates between 1970 and 1985 were 5.4 percent for white women, 5.7 percent for minority men, 6.0 percent for white men, and 6.6 percent for minority women.

In 1983–85, the stroke death rates among 55–74-year-olds were lowest for white women (79 per 100,000) and highest among minority men (216 per 100,000). Stroke death rates among men were about one-third higher than for women, and stroke death rates for minority men and women were more than twice as high as for their white counterparts. This large racial differential is at least partially explained by the higher prevalence of hypertension and diabetes among the black population (NCHS, 1986, 1987).

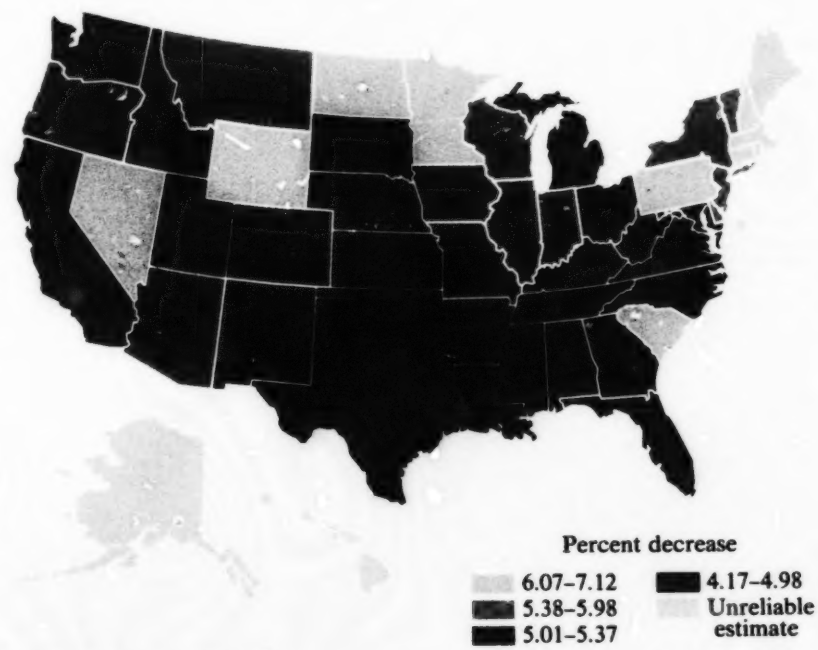
11. Change in stroke death rates among white males 55–74 years of age: 1970–85



NOTE: Rates are age adjusted.

SOURCE: National Center for Health Statistics: Data from the Compressed Mortality File.

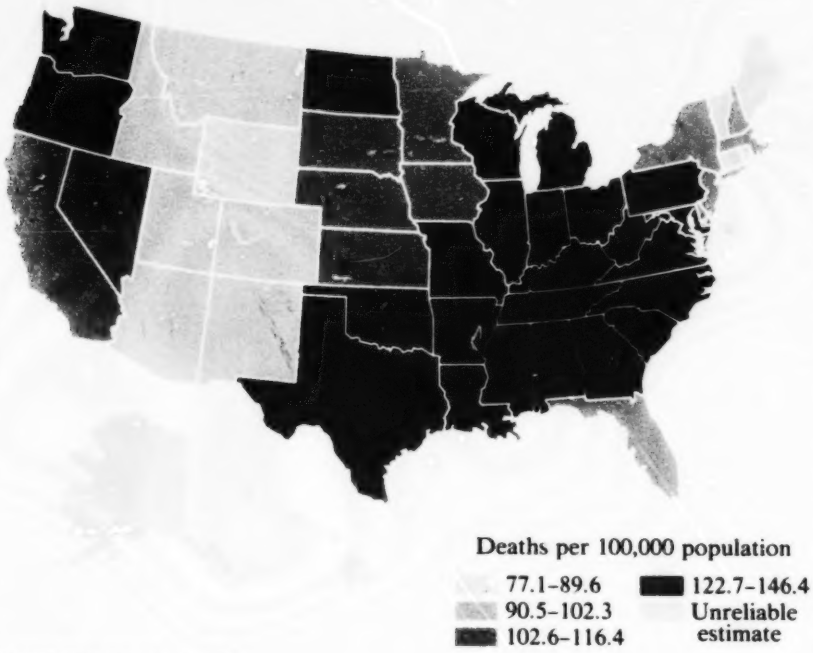
12. Change in stroke death rates among white females 55–74 years of age: 1970–85



NOTE: Rates are age adjusted.

SOURCE: National Center for Health Statistics: Data from the Compressed Mortality File.

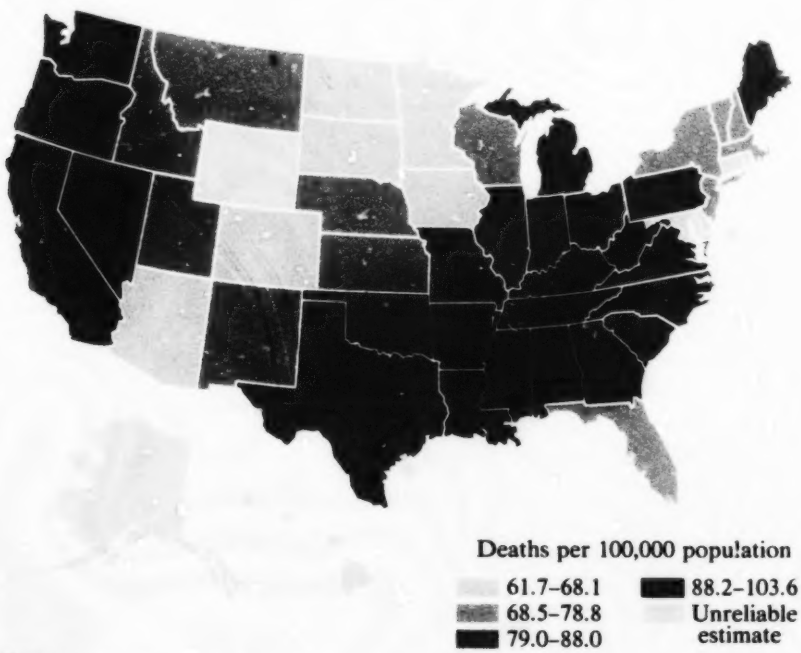
13. Stroke death rates among white males 55–74 years of age: 1983–85



NOTE: Rates are age adjusted.

SOURCE: National Center for Health Statistics: Data from the Compressed Mortality File.

14. Stroke death rates among white females 55–74 years of age: 1983–85



NOTE: Rates are age adjusted.

SOURCE: National Center for Health Statistics: Data from the Compressed Mortality File.

Geographic Variation

■ Between 1970 and 1985, rapid declines in stroke mortality among persons 55–74 years of age occurred in all States. Average annual declines in stroke mortality varied among the States from 5.1 to 7.8 percent for white men (figure 11) and from 4.2 to 7.1 percent for white women (figure 12). Five of the 10 States with the least rapid declines for white men are in the South, as are 7 of the 10 States with the least rapid declines for white women. However, declines in stroke mortality were quite rapid, even in these States. Four of the 10 States with the most rapid declines in stroke death rates for white men are in New England as are 5 of the 10 States with the most rapid declines for white women.

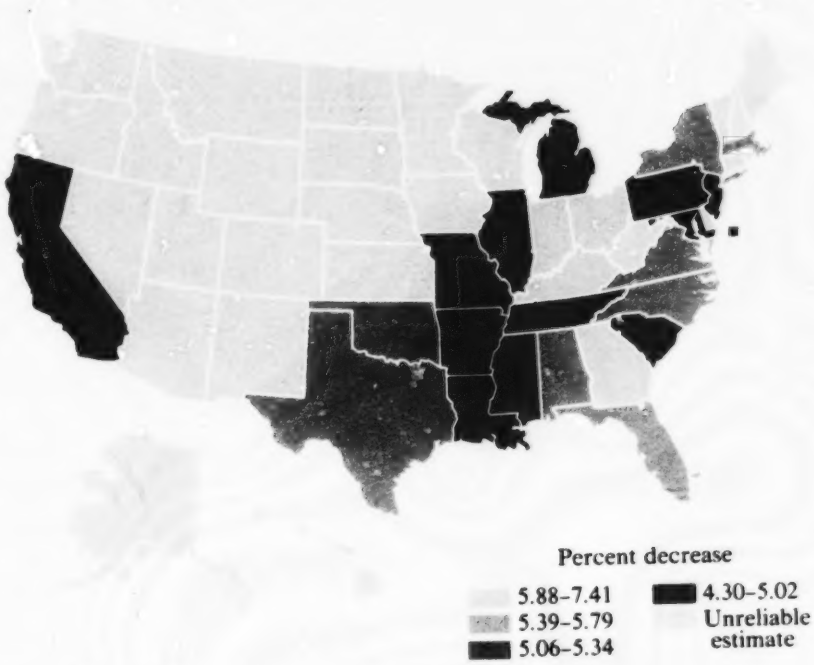
■ In 1983–85, State stroke death rates among white persons 55–74 years of age ranged from 77 to 146 deaths per 100,000 population for men (figure 13) and from 62 to 104 deaths per 100,000 for women (figure 14). Nine of the 10 States with the highest stroke death rates for both white men and white women are in the South. The lowest stroke death rates for white men were found in six Mountain States and four New England States. Rhode Island, Colorado, and Connecticut had the lowest stroke death rates for white women. Other States with among the lowest stroke death rates for white women include a group of four States in the West North Central division.

■ Death rates for stroke vary considerably among different racial groups. In 1979–81, the stroke death rates among men 55–74 years of age were estimated as 282 per 100,000 for the black population, 132 for whites, 118 per 100,000 for American Indians, and 112 per 100,000 for Asian and Pacific Islanders. Among women 55–74 years of age, the comparable stroke death rates were 220 per 100,000 for blacks, 96 for whites, 78 for American Indians, and 75 for Asian and Pacific Islanders. Thus, as for heart disease, stroke death rates for the minority population within each State depend upon the State's racial distribution. In most of the 26 States with data shown in figures 15–18, the minority population is predominately black. However, substantial proportions of the minority population in Hawaii and California

are Asian and Pacific Islander; in Oklahoma a substantial proportion are American Indian.

- Among the 26 States with data shown for the 55–74-year-old minority population, average annual declines in stroke mortality between 1970 and 1985 ranged from 4.3 to 7.4 percent for minority men (figure 15) and from 4.4 to 8.2 percent for minority women (figure 16). Maryland, Michigan, and Louisiana had the least rapid declines in stroke mortality for minority men; Maryland, Hawaii, and California had the least rapid declines for minority women. Indiana, Hawaii, and Georgia experienced the most rapid declines in stroke mortality for minority men, whereas Indiana, Texas, and North Carolina experienced the fastest declines for minority women.
- In 1983–85, stroke death rates varied substantially among States for both 55–74-year-old minority men and women. The stroke death rate per 100,000 population ranged from 108 to 401 for minority men (figure 17), and from 77 to 270 for minority women (figure 18). The five States with the highest stroke death rates for both minority men and women are in the South. Hawaii and Massachusetts had the lowest stroke death rates for both minority men and minority women. The minority population is predominately Asian and Pacific Islander in Hawaii and predominately black in Massachusetts.
- For the population 55–74 years of age State rankings on stroke death rates for men and women are highly correlated ($r = .97$ for the minority population and $r = .81$ for the white population). State rankings on stroke death rates for white men and minority men are also positively correlated ($r = .74$), but State rankings for white women and minority women are less correlated ($r = .49$). In addition, there is little correlation between State rankings on declines in stroke death rates for the different race-sex groups.
- States that ranked high on stroke death rates for minority women during 1970–72 also tended to have the most rapid declines in stroke death rates for minority women during 1970–85 ($r = .61$). State rankings on stroke death rates in 1970–72 are weakly correlated with rankings on declines in stroke death rates during 1970–85 for the other three race-sex subgroups ($r = .23$–$.27$).

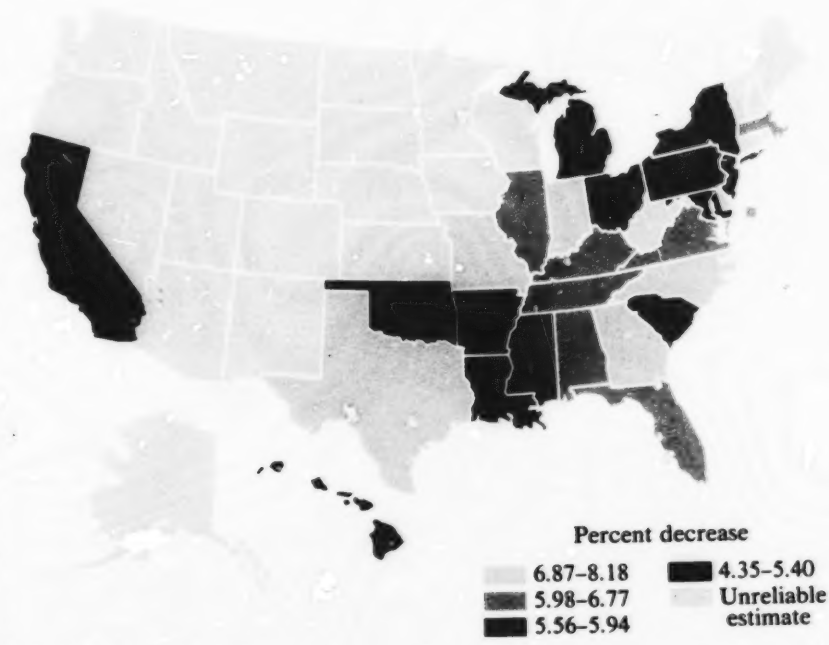
15. Change in stroke death rates among minority males 55–74 years of age: 1970–85



NOTE: Rates are age adjusted.

SOURCE: National Center for Health Statistics: Data from the Compressed Mortality File.

16. Change in stroke death rates among minority females 55–74 years of age: 1970–85



NOTE: Rates are age adjusted.

SOURCE: National Center for Health Statistics: Data from the Compressed Mortality File.

17. Stroke death rates among minority males 55–74 years of age: 1983–85

Deaths per 100,000 population

107.7–159.5	298.1–401.4
163.2–199.5	Unreliable estimate
228.0–294.1	

NOTE: Rates are age adjusted.

SOURCE: National Center for Health Statistics: Data from the Compressed Mortality File.

18. Stroke death rates among minority females 55–74 years of age: 1983–85

Deaths per 100,000 population

76.7–120.2	220.9–270.3
124.4–168.6	Unreliable estimate
173.2–202.8	

NOTE: Rates are age adjusted.

SOURCE: National Center for Health Statistics: Data from the Compressed Mortality File.

■ Differences across the country in hypertension levels, medical care, and socioeconomic factors may contribute to the variation in stroke death rates. Additional research is needed to understand further the reasons for State variation in stroke mortality declines and the larger State variation in stroke death rates.

References

Kuller, L. H. 1978. Epidemiology of Stroke. *Advances in Neurology* 19:281–311.

National Center for Health Statistics, T. Drizd, A. L. Dannenberg and A. Engel. 1986. Blood pressure levels in persons 18–74 years of age in 1976–80, and trends in blood pressure from 1960 to 1980 in the United States. *Vital and Health Statistics.* Series 11, No. 234. DHHS Pub. No. (PHS) 86-1684. Public Health Service. Washington. U.S. Government Printing Office.

National Center for Health Statistics, W. C. Hadden and M. I. Harris. 1987. Prevalence of diagnosed diabetes, undiagnosed diabetes, and impaired glucose tolerance in adults 20–74 years of age, United States, 1976–80. *Vital and Health Statistics.* Series 11, No. 237. DHHS Pub. No. (PHS) 87-1687. Public Health Service. Washington. U.S. Government Printing Office.

Wolf, P. A., W. B. Kannel, and J. Vester. 1983. Current status of risk factors for stroke. *Neurol Clin* 1:317–43.

Lung Cancer Mortality Among Women 55–74 Years of Age

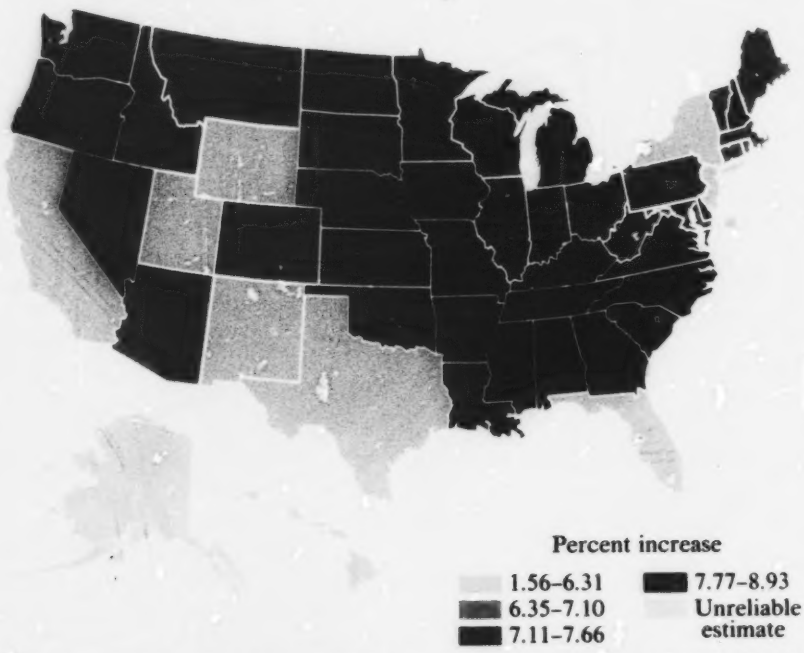
Background

Lung cancer, the leading cause of cancer deaths among women 55–74 years of age, is one of the most preventable causes of death in the United States (U.S. DHHS, 1982). Cigarette smoking has been estimated to be responsible for at least 75 percent of lung cancer deaths among women (Centers for Disease Control, 1987). For 1985, this percentage represents approximately 30,000 preventable smoking-related lung cancer deaths among all women in the United States.

Between 1970 and 1985, age-adjusted lung cancer death rates among women 55–74 years of age increased about 7 percent per year, the largest increase in cancer death rates for any site. The increases primarily are due to the aging of cohorts of women with higher proportions of smokers. In contrast, among men 55–74 years of age the lung cancer death rate increased about 1 percent each year between 1970 and 1982 and remained stable between 1982 and 1985.

White women have slightly higher death rates for lung cancer than minority women. In 1970, the lung cancer death rate for white women 55–74 years of age was 5 percent higher than for minority women (42 versus 40 deaths per 100,000 population), and in 1985, the differential was 16 percent (115 versus 99 deaths per 100,000).

19. Change in lung cancer death rates among females 55–74 years of age: 1970–85



NOTE: Rates are age adjusted. Includes deaths from all cancers of the respiratory system, of which 94–96 percent were attributable to lung cancer during 1970–85.

SOURCE: National Center for Health Statistics: Data from the Compressed Mortality File.

Geographic Variation

■ Between 1970 and 1985, all States experienced increases in lung cancer death rates for women 55–74 years of age. However, there was considerable variation among States in the average annual increases, ranging from 1.6 to 8.9 percent per year (figure 19). Hawaii has had by far the slowest annual increase in lung cancer death rates (1.6 percent per year). Other States with the least rapid annual increases during 1970–85 were New Mexico (4.2 percent), Utah (4.4 percent), and the District of Columbia (5.3 percent). Six of the 10 States with the most rapid increases are in the South (Tennessee, North Carolina, Kentucky, Georgia, Mississippi, Arkansas). Average annual increases in these States range from 7.8 to 8.9 percent per year. Other States with average annual increases greater than 8 percent per year were Iowa, Nebraska, and Oregon.

■ In 1983–85, lung cancer was the leading cause of cancer deaths for women 55–74 years of age in 41 of the 50 States shown in figure 20. In contrast, lung cancer was the leading cause of cancer deaths for women 55–74 years of age in only one State in 1970–72.

20. Lung cancer death rates among females 55–74 years of age: 1970–85

NOTE: Rates are age adjusted. Includes deaths from all cancers of the respiratory system, of which 94–96 percent were attributable to lung cancer during 1970–85.

SOURCE: National Center for Health Statistics: Data from the Compressed Mortality File.

■ Between 1970–72 and 1983–85, the variation among States in lung cancer death rates for women 55–74 years of age widened. For the 50 States shown in figure 20, the lung cancer death rates for women 55–74 years old ranged from 25 to 61 deaths per 100,000 in 1970–72 compared with a range from 45 to 173 deaths per 100,000 in 1983–85. In 1983–85, Nevada had by far the highest lung cancer death rate for women of these ages (173), and Utah had by far the lowest death rate (45). Four of the 6 States with the highest 1983–85 lung cancer death rates for women 55–74 years old are in the West (Nevada, Oregon, Washington, California), as are 5 of the 10 States with the lowest rates (Utah, Hawaii, Idaho, Colorado, New Mexico). Hawaii had the sixth highest lung cancer death rate for 55–74-year-old women in 1970–72, but because of a relatively slow annual increase Hawaii had the second lowest lung cancer death rate in 1983–85.

■ In 1985, among the 50 States shown in figure 20, the variation in the percent of women 55–74 years of age who ever smoked ranged from 10 to 53 percent (U.S. Bureau of the Census, 1985). There was a strong positive correlation ($r = .62$) between State rankings on age-adjusted lung cancer death rates in 1983–85 and the 1985 percent of women 55–74 years old who ever smoked.

■ Factors other than cigarette smoking that are associated with lung cancer include environmental exposures, such as radon gas; high doses of ionizing radiation, such as x rays; and diets low in vitamin A especially among heavy smokers (Page and Asire, 1985). Geographic variation in these factors may also contribute to the variation in lung cancer mortality.

References

Centers for Disease Control. 1987. Smoking-attributable mortality and years of potential life lost—United States, 1984. *MMWR* 36:693–697.

National Institutes of Health, H. S. Page and A. J. Asire. 1985. *Cancer Rates and Risks.* 3d edition. NIH Pub. No. 85–691. Public Health Service. Washington. U.S. Government Printing Office.

U.S. Bureau of the Census. 1985. Unpublished data from the Current Population Survey.

U.S. Department of Health and Human Services. 1982. *The Health Consequences of Smoking: A Report of the Surgeon General.* DHHS Pub. No. (PHS) 82–50179. Public Health Service. Washington. U.S. Government Printing Office.

Breast Cancer Mortality Among Women

Background

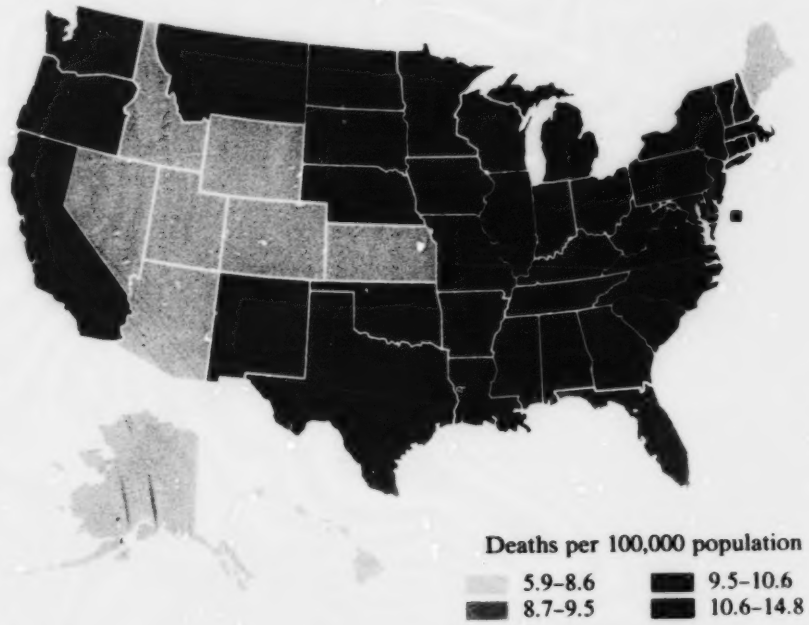
Breast cancer is a leading cause of cancer deaths among women, accounting for 40,093 deaths in 1985. Risk factors that increase the likelihood of developing breast cancer include age, family history of the disease, late childbearing, having no children, early menarche, and late menopause (Miller and Bulbrook, 1980).

Early diagnosis of breast cancer is a major determinant of survival. Among women who are diagnosed with localized disease, 90 percent survive for at least 5 years compared with 68 percent for those with regional disease and only 18 percent for those with distant disease. During 1979–84 about 50 percent of women with breast cancer were diagnosed with localized disease (National Cancer Institute, 1988). Public health efforts have focused on increasing the detection of localized breast cancer through breast self-examination, periodic clinical examination, and mammography. Although screening for breast cancer has been increasing, further efforts are needed. In 1985, the proportion of women who did not have clinical breast exams within the previous 2 years was 30 percent for women 25–44 years of age and 41 percent for women 55–74 years of age.

Between 1970 and 1985, national death rates for breast cancer among premenopausal women (25–44 years of age) have declined an average of nearly 1 percent per year, from 12 to 10 deaths per 100,000. In contrast, death rates for breast cancer among postmenopausal women (55–74 years of age) increased by 0.6 percent per year during this period, from 84 to 93 deaths per 100,000 population.

In 1985, national breast cancer death rates among premenopausal women were 25 percent lower for white women than for minority women (9 versus 12 deaths per 100,000). In contrast, among postmenopausal women, breast cancer death rates were 13 percent higher for white women than for minority women (94 versus 83 deaths per 100,000).

21. Breast cancer death rates among females 25–44 years of age: 1979–85



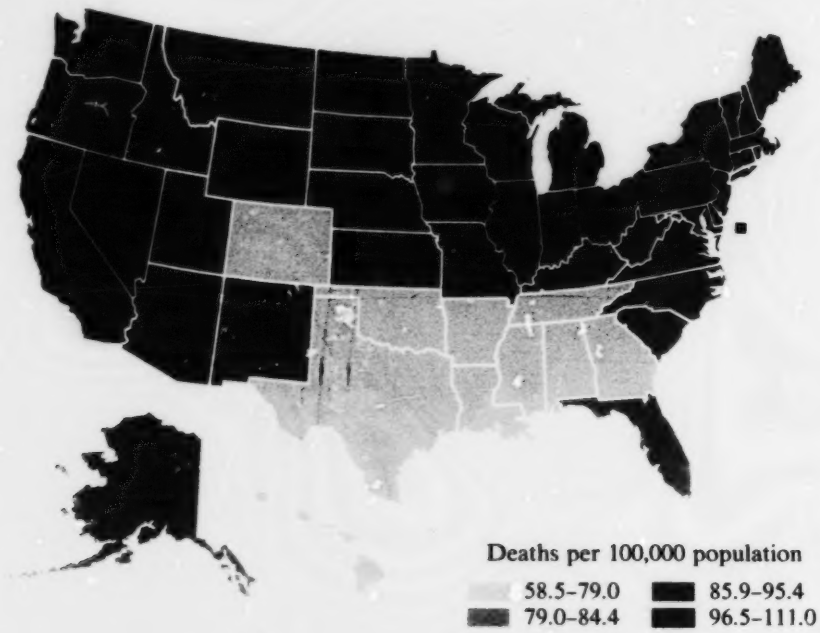
NOTE: Rates are age adjusted.

SOURCE: National Center for Health Statistics: Data from the Compressed Mortality File.

Geographic Variation

■ Among premenopausal women (25–44 years), the 1979–85 breast cancer death rates varied among the States from 6 to 15 deaths per 100,000 (figure 21). Nine of the 10 States with the highest rates are on the east coast, stretching from Rhode Island to South Carolina. Eight of the 10 States with the lowest breast cancer death rates for premenopausal women are in the West.

22. Breast cancer death rates among females 55–74 years of age: 1979–85



NOTE: Rates are age adjusted.

SOURCE: National Center for Health Statistics: Data from the Compressed Mortality File.

■ In 1979–85, breast cancer death rates for postmenopausal women (55–74 years) varied from 59 deaths per 100,000 in Hawaii to 111 in the District of Columbia (figure 22). Mortality from breast cancer in 1979–85 was highest in the northeastern part of the United States. Six of the 10 States with the highest breast cancer death rates for postmenopausal women are in the Northeast region, and two other States with among the highest rates, Ohio and Delaware, border the Northeast. Eight of 10 States with the lowest breast cancer death rates for postmenopausal women are in the South.

■ There was a moderate tendency for States to rank high or low on breast cancer mortality for both premenopausal and postmenopausal women ($r = .38$). Five States with among the highest breast cancer death rates for premenopausal women also had among the highest death rates for postmenopausal women (District of Columbia, New Jersey, New York, Delaware, Illinois). Conversely, three States with among the lowest breast cancer death rates for premenopausal women also had among the lowest death rates for postmenopausal women (Hawaii, Colorado, Utah). Louisiana and Alabama, on the other hand, had among the lowest breast cancer death rates for postmenopausal women but had among the highest death rates for premenopausal women.

■ Reasons for the State variation in breast cancer mortality are unclear. It has been suggested that geographic variation in dietary habits may contribute to the variation in breast cancer death rates among postmenopausal women (Blot et al., 1977).

References

Blot, W. J., J. F. Fraumeni, and B. J. Stone. 1977. Geographic patterns of breast cancer in the United States. *J Natl Cancer Inst* 59:1407-1411.

Miller, A. B., and R. D. Bulbrook. 1980. The epidemiology and etiology of breast cancer. *N Engl J Med* 303:1246–1248.

National Cancer Institute. 1988. *Annual Cancer Statistics Review Including Cancer Trends: 1950–85.* NIH Pub. No. 88–2789. National Institutes of Health. Washington. U.S. Government Printing Office.

Suicide Among Males 15–24 Years of Age

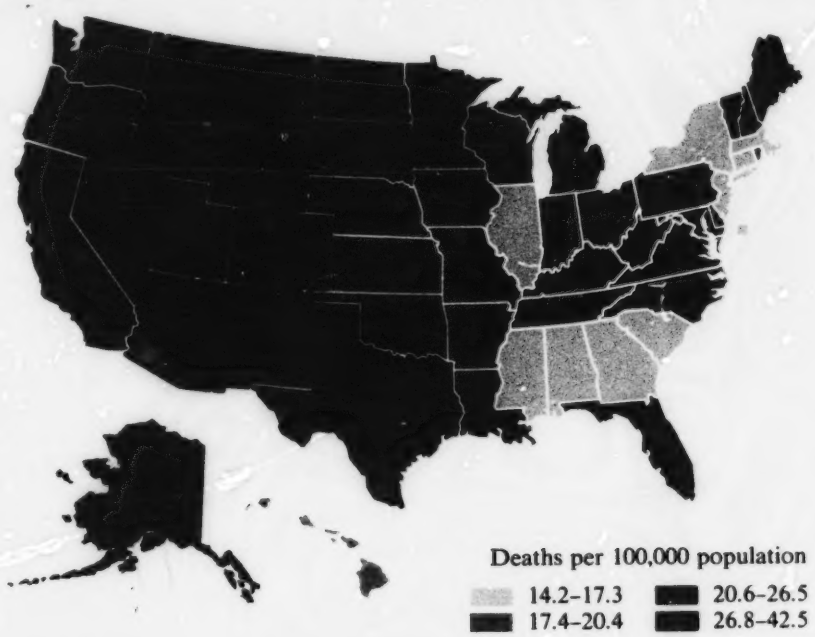
Background

Suicide is the eighth leading cause of death in the United States but the second leading cause of death among young persons 15–24 years of age. The youth suicide death rate more than tripled between 1950 and 1980 (CDC, 1986) and has remained fairly stable since that time. Suicide death rates vary considerably by race and sex with the majority of suicides in all age groups committed by white males. In 1985, the male-to-female suicide ratio in the 15–24 years age group was nearly 5 to 1; the white-to-black suicide ratio was almost 2 to 1.

Factors that have been shown to be associated with suicide include psychiatric disorders, family history of completed suicide, biochemical risk factors, substance abuse, media influences, and firearms in the home (Monk, 1987). Firearms are the most frequently used method of suicide for both males and females 15–24 years of age, accounting for about 60 percent of all youth suicides (Boyd and Moscicki, 1986). The 30-year climb in suicide mortality in this age group is paralleled by a 30-year increase in firearm suicides (Moscicki and Boyd, 1983).

The suicide death rate for males 15–24 years of age increased from 6.5 deaths per 100,000 in 1950 to 20.2 deaths per 100,000 in 1980. From 1980 to 1984, the suicide death rate for young males remained essentially unchanged. In 1985, the rate rose slightly to 21.4 per 100,000, primarily from increases in suicide among males 15–19 years of age.

23. Suicide death rates among males 15–24 years of age: 1979–85



SOURCE: National Center for Health Statistics: Data from the Compressed Mortality File.

Geographic Variation

- Suicide death rates for young males vary substantially among the States. During 1979–85, the average annual suicide death rate ranged from 14 deaths per 100,000 in New York to 43 deaths per 100,000 in New Mexico (figure 23).
- Eight western States, South Dakota, and Vermont have the 10 highest suicide death rates for young males. In contrast, the 10 States with the lowest suicide rates are mostly in the South and Northeast.
- In general, suicide death rates for young males have increased over time throughout the United States. The geographic distribution with few exceptions was the same during the early 1970's as during 1979–85. Of note are two States showing substantial changes in their rankings since 1970. In 1979–85, the suicide death rate for California was about the same as the national average, whereas during the early 1970's California had one of the highest suicide death rates for young males. On the other hand, South Dakota had a suicide death rate around the national average during the early 1970's but had one of the highest suicide death rates during 1979–85.

References

Boyd, J. H., and E. K. Moscicki. 1986. Firearms and youth suicide. *Am J Public Health* 76:1240–1242.

Centers for Disease Control. 1986. Youth suicide in the United States, 1970–1980.

Monk, M. 1987. Epidemiology of suicide. In M. Szklo, L. Gordis, M. Gregg, and M. Levine, eds., *Epidemiologic Reviews*. Vol. 9. Baltimore. Johns Hopkins University.

Moscicki, E. K., and J. H. Boyd. 1983–85. Epidemiologic trends in firearm suicides among adolescents. *Pediatrician* 12:52–62.

Mesothelioma Mortality Among Men

Background

Mesothelioma is a relatively rare cancer of the pleura or peritoneum, the membranes that surround the lungs and line the chest cavity. Asbestiform fibers are widely accepted as the causative agent in the vast majority of cases (Lilis, 1986). Asbestiform fibers include asbestos and similar materials with a broad range of chemical compositions and crystal structures, sizes, shapes, and physical properties. Asbestos has been widely used because it resists heat and chemical attack, has strength and flexibility, and has defect-free surfaces (National Research Council, 1984). In the United States, asbestiform fibers have been used for building materials (including insulation, vinyl tile, roofing tile, and cement sheet and pipe), for friction products (including brake linings, gasket components, and industrial friction materials), and for insulation purposes (including electrical wire and pipe insulation, hoods and vents for corrosive compounds, electrical motor components, and roof coatings and patching compounds).

The use of asbestiform fibers increased greatly during this century, rising from about 20,000 metric tons in 1900 to a peak consumption of 800,000 metric tons in 1973 and 1974 (U.S. Bureau of Mines, 1983). Primarily because of concern over health effects, by 1982 the consumption had dropped to about 250,000 metric tons. Workers can be exposed to asbestiform fibers in a wide variety of industries and occupations, including mining and mineral processing, the asbestos products industry, secondary manufacturing (such as heating equipment, electrical housewares, and industrial process furnaces), shipbuilding, and construction. The Occupational Safety and Health Administration (OSHA) has standards for maximum allowable worker exposures to asbestiform fibers of six minerals.

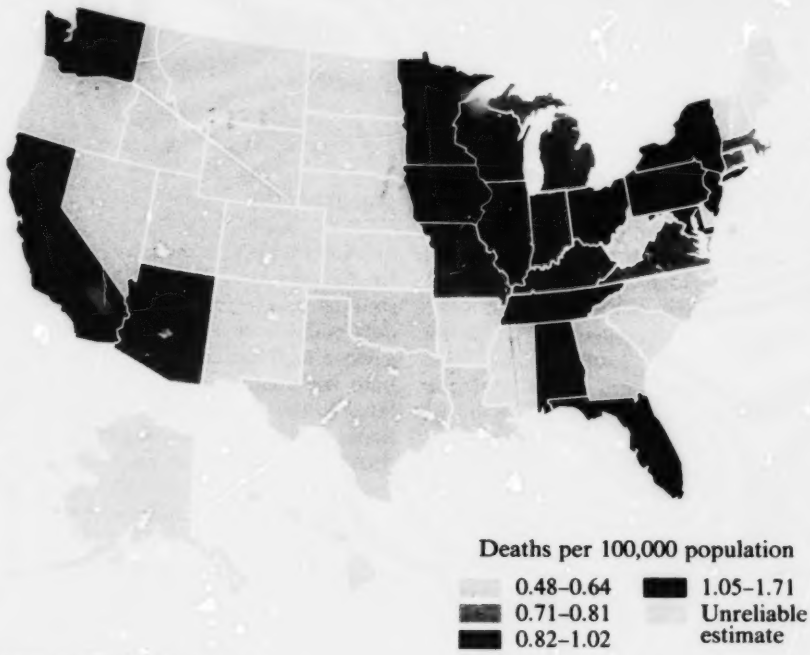
Many asbestiform materials contain fibers small enough to enter the respiratory system. Most of these fibers are cleared from the lung. However, fibers remaining in the lung cause small areas of fibrosis (scar tissue) in the lung and in the surrounding membranes. These areas can become larger and more serious with greater exposure. Diseases associated with asbestiform fiber exposures include mesothelioma, lung cancer, and asbestosis (a chronic disorder resulting in breathing difficulty, nonproductive cough, abnormal lung sounds known as rales, and measurable decrements in lung function).

Asbestos-related health effects are generally restricted to people who have had occupational exposures, but health effects have also been noted among family members of workers and in populations living near natural sources of the fiber. Because asbestiform fibers are ubiquitous, virtually everybody is exposed to some extent. However, there is little information about the health effects of nonoccupational exposures to these fibers.

The following discussion focuses on deaths from mesothelioma. Although asbestos exposure may cause lung cancer, the fraction of lung cancer deaths that might be attributed to asbestos exposure is small. The effect of smoking on lung cancer is much greater than that of asbestos. Unlike lung cancer, the occurrence of mesothelioma is not associated with smoking (Hammond et al., 1979). Asbestosis is not discussed here because asbestosis deaths are very rare (only 130 deaths among men in 1985). Mesothelioma generally occurs 20 years after onset of exposure. Some cases have occurred in individuals who had only short-term occupational exposures (Selikoff and Lee, 1978). Therefore, the deaths occurring in the 1980's may be due to conditions many years ago.

In 1985, there were 571 deaths with an underlying cause of mesothelioma among men 25 years and over (see table 33). For an additional 102 deaths, mesothelioma was listed as a nonunderlying cause. Of these additional 102 deaths, the underlying cause of death was lung cancer for 33 percent, other malignant neoplasms for 20 percent, and heart disease for 24 percent. Of the deaths with mesothelioma as an underlying cause, 63 percent occurred among men 65 years and over.

24. Mesothelioma death rates among males 25 years of age and over: 1979–85



NOTE: Rates are age adjusted.

SOURCE: National Center for Health Statistics: Data from the Compressed Mortality File.

Geographic Variation

- The national age-adjusted death rate for mesothelioma was 0.87 per 100,000 men 25 years and over in 1979–85. The death rates in the 27 States with more than 50 expected deaths from this disease during 1979–85 ranged from 0.48 per 100,000 men in Oklahoma to 1.71 per 100,000 men in Washington (figure 24).
- Washington and New Jersey had the highest mesothelioma death rates (1.71 and 1.69 per 100,000 men, respectively). The next highest rate was 1.22 per 100,000 men in Iowa. The elevated rate in New Jersey may be due to the large number of manufacturing sites that use asbestiform fibers and the shipbuilding and repair industry in that State. Washington had a number of shipbuilding companies during World War II that may account for the relatively high rate of mortality from mesothelioma many years later (Milham, 1983).
- Other States with relatively high mesothelioma death rates were Florida (1.08) and New York (1.05). The high rate in Florida may reflect the large population that moves to that State as retirees from the Northeast and Middle Atlantic States that also have relatively high rates.
- All five States with the lowest mesothelioma death rates are in the South (Oklahoma, Georgia, Louisiana, Texas, North Carolina).

References

Lilis, R. 1986. Mesothelioma. In J. A. Merchant, ed. *Occupational Respiratory Diseases.* DHHS Pub. No. (NIOSH) 86–102. Washington. U.S. Government Printing Office.

Milham, S., Jr. 1983. *Occupational Mortality in Washington State. 1950–1979.* DHHS Pub. No. (NIOSH) 83–116. Washington. U.S. Government Printing Office.

National Research Council. 1984. *Nonoccupational Health Risks of Asbestiform Fibers.* Washington. National Academy Press.

Selikoff, I. J., and D. H. K. Lee. 1978. *Asbestos and Disease.* New York. Academic Press.

U.S. Bureau of Mines. 1983. Asbestos. *Minerals Yearbook 1982.* Washington.

Coal Workers' Pneumoconiosis Mortality Among Men

Background

Coal workers' pneumoconiosis is a lung disease that can result from exposure to coal dust. Exposures to coal dust occur in underground coal mines, surface coal mines, in plants that prepare the coal, and in occupations related to the distribution of coal. Other occupations with potential exposure to dust from coal derivatives include rubber workers, ceramics workers, ink workers, printers, paper workers, and plastics workers (NIOSH, 1986).

Exposure to coal dust can be a health hazard when the dust is inhaled and deposited in the lung. When the dust remains in the lung, the surrounding tissues form small areas of scar tissue. With continued exposure larger areas of scar tissue are found. Eventually, difficulty in breathing, persistent cough and phlegm production, and emphysema may result.

Coal workers' pneumoconiosis takes 10–20 years to develop. The severity of the disease reflects the person's dust exposure over his entire working life. Therefore, deaths during 1979–85 reflect industrial exposures occurring in the 1940's through the 1970's. The probability of developing severe coal workers' pneumoconiosis when exposed for 35 years to the maximum levels currently allowed (2 mg/m^3) is about 1 percent. However, at levels representative of exposures before 1972 (4–6 mg/m^3), the probabilities were 4–10 percent (Merchant, 1986). Smoking appears to increase the risk of complications, but smoking does not appear to increase the risk of getting coal workers' pneumoconiosis (U.S. DHHS, 1985).

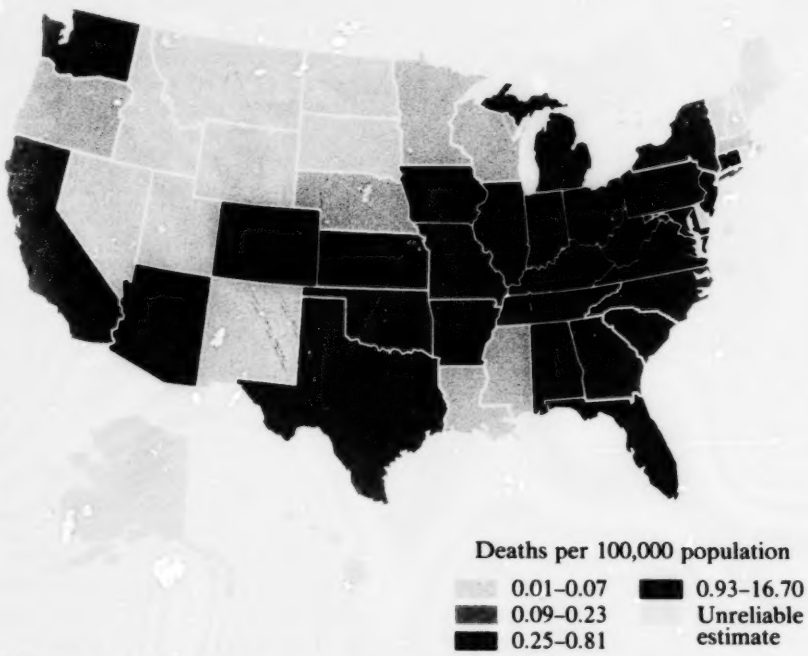
Historical accounts of "miners' black lung" date to 1936. Many clinical and epidemiologic studies have demonstrated the association between exposure to coal dust and increased risk of coal workers' pneumoconiosis. In 1946, the first Federal Mine Safety Code was enacted. However, strong regulatory powers were not given to the Bureau of Mines until the 1960's. The Federal Coal Mine Health and Safety Act established a coal mine dust standard of 2 mg/m^3 effective in 1972. This act also mandated other safety and health standards, health surveillance, and Federal compensation and guaranteed right of entry to the National Institute for Occupational Safety and Health. The health hazards, referred to in the Act as "black lung," include any chronic dust diseases of the lung arising out of employment in an underground coal mine.

In 1985, 947 deaths among men 25 years and over were recorded with coal workers' pneumoconiosis as the underlying cause of death (see table 33). Almost 91 percent of these deaths occurred in men 65 years and over. An additional 1,652 deaths among men recorded a mention of coal workers' pneumoconiosis as a contributing cause of death. Among these other deaths, 45 percent had heart disease as the underlying cause of death, and 26 percent had malignant neoplasms as the underlying cause of death.

Geographic Variation

- The national age-adjusted death rate for coal workers' pneumoconiosis was 1.46 deaths per 100,000 men 25 years and over in 1979–85. Death rates for coal workers' pneumoconiosis were quite variable among the 35 States shown in figure 25. Nearly 67 percent of the total 6,698 deaths from coal workers' pneumoconiosis during 1979–85 occurred in Pennsylvania where the age-adjusted death rate was 16.7 per 100,000 men, a rate 11 times the national average. Other States with the highest death rates were West Virginia (11.4), Kentucky (4.9), Virginia (2.1), Ohio (1.1), Alabama (1.0), and Colorado (0.9).
- The States with elevated rates closely correspond to the areas with a relatively high percentage of the male labor force in mining (figure 26). These States are concentrated in the Appalachian Mountain and Rocky Mountain areas.
- The remainder of the States had very low death rates from coal workers' pneumoconiosis ranging from 0.01 to 0.8 deaths per 100,000 men.

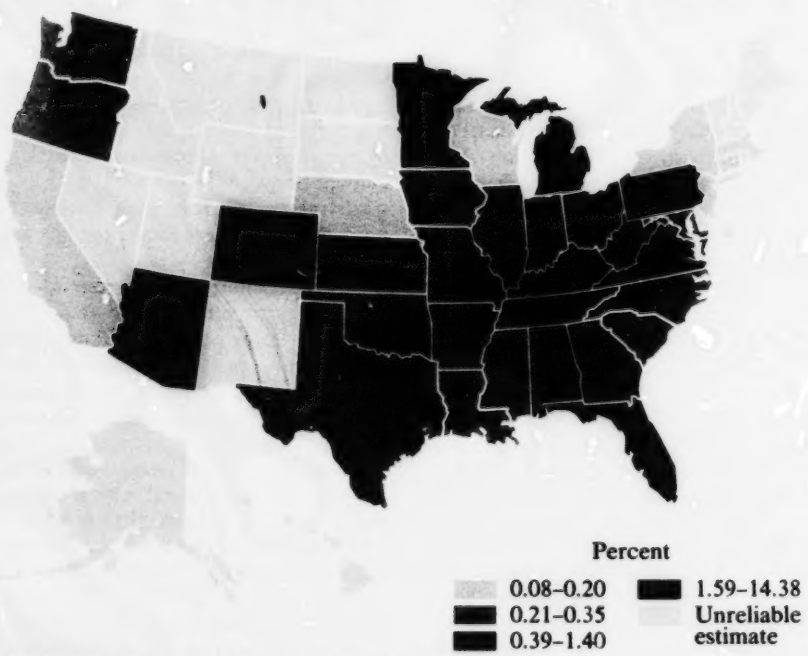
25. Coal workers' pneumoconiosis death rates among males 25 years of age and over: 1979–85



NOTE: Rates are age adjusted.

SOURCE: National Center for Health Statistics: Data from the Compressed Mortality File.

26. Males 17 years of age and over employed in mining: 1980



SOURCE: U.S. Bureau of the Census: 1980 Census of Population.

References

Attfield, M., R. Reger, and R. Glenn. 1984. The incidence and progression of pneumoconiosis over nine years in U.S. coal miners. *Am J Ind Med* 6:407–415 and 417–425.

Merchant, J. A. 1986. Coal workers' pneumoconiosis. In J. M. Last, ed. *Maxcy-Rosenau Public Health and Preventive Medicine.* Norwalk, Conn. Appleton-Century-Crofts.

National Institute of Occupational Safety and Health. 1986. *Occupational Respiratory Disease.* DHHS (NIOSH) Pub. No 86–102. Washington. U.S. Government Printing Office.

U.S. Department of Health and Human Services. 1985. *The Health Consequences of Smoking: Cancer and Chronic Lung Disease in the Workplace. A Report of the Surgeon General.* DHHS (PHS) Pub. No. 85–50207. Public Health Service. Washington. U.S. Government Printing Office.

Acute Leukemia Mortality Among Men

Background

Leukemia is a family of cancers that arise in blood cells or in blood-forming cells of the bone marrow. Leukemias are classified as acute or chronic depending on the maturity of the cancerous cells and expected duration of the disease. The various leukemias differ in terms of cause, therapy, and prognosis.

In 1985, acute leukemias accounted for approximately 1 percent of new cancer cases and 1.4 percent of cancer deaths in the United States (NCI, 1988). The incidence of acute leukemias has remained steady during 1975–85. The prognosis among adults with acute leukemia remains poor (40 percent of the adults with acute lymphocytic leukemia and 5 percent of adults with acute myeloid leukemia survive 7 years after diagnosis). Hence, the mortality rates for acute leukemias among adults have not changed over the past decade. Among adults 25 years of age and over the age-adjusted acute leukemia death rate was about 50 percent higher for men than women in 1985.

Toxic physical and chemical exposures have been shown to cause increased risk of acute leukemia. Because exposures to these toxicants often occur in occupational settings, the risk of acute leukemia is elevated among workers in certain occupations. The most conclusive research has concerned the following exposures: ionizing radiation, benzene, ethylene oxide, and the agricultural environment (OTA, 1985).

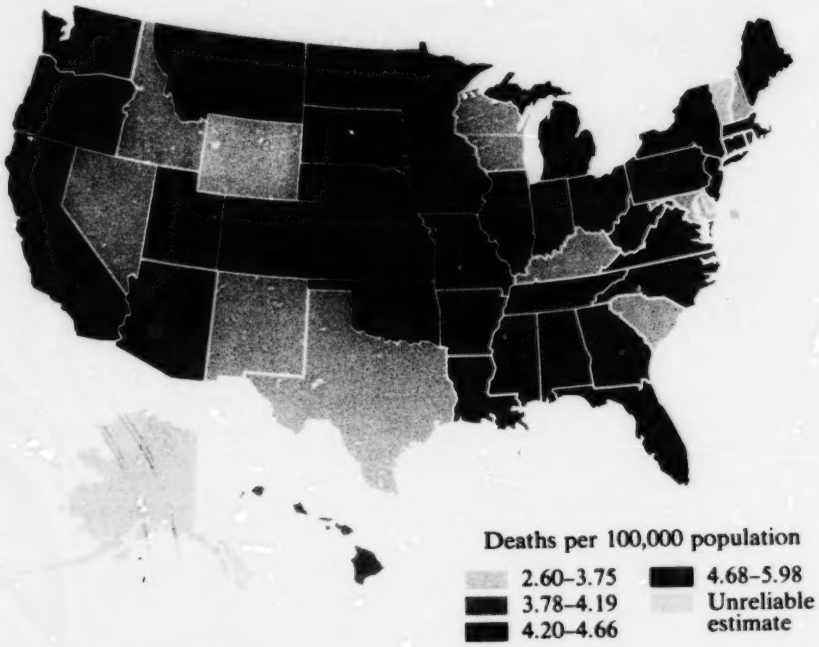
The link between exposure to ionizing radiation and increased risk of leukemia was first described in the 1890's in case studies of radiation workers (Linet, 1985). The chief sources of ionizing radiation are x-ray therapy and diagnostic x rays. In the 1940's, an increased risk was described among medical radiologists when compared to other physicians. The risk to radiologists has decreased with improved safety techniques, such as better shielding, lower doses, and more concentrated fields of exposure. Other occupations with exposure to low levels of radiation include nuclear power workers and nuclear shipyard workers. The risks to workers at the lower exposures are not well established. The nonoccupational, high-dose exposures of the atomic bomb blasts in Japan and therapeutic medical radiation have also been associated with high risk of leukemia.

The association between occupational exposure to benzene and increased risk of leukemia was also noted in case studies reported in the 1890's. Subsequent epidemiologic studies in the 1970's have supported this association for acute leukemias (Linet, 1985; OTA, 1985). Benzene is widely used as a solvent in the chemical, plastic, rubber, and pharmaceutical industries. It also comprises up to 5 percent by weight of unleaded gasoline. Occupations at risk of exposure include rubber workers, petroleum production or product workers, gas station attendants, and shoeleather workers. Workers are exposed to benzene by breathing fumes or having the liquid splashed on clothes or skin. Studies of workers employed in rubber-manufacturing plants revealed that a strong dose-response relationship exists such that those individuals with high doses of benzene may have several hundredfold increased risk of developing acute leukemia. In general, however, the benzene-associated relative risks have been 1.5–3.0 times that of the general population. The U.S. Occupational Safety and Health Administration (OSHA) has established workplace exposure limits for benzene (NIOSH, 1985).

Nonoccupational exposures to benzene are often associated with hobby or home activities. Benzene is a component of furniture-refinishing products, paint strippers, dry cleaning and spot removers, and paints and waxes.

Exposure to ethylene oxide (EtO) has also been associated with increased risk of acute leukemia. EtO is a colorless liquid or gas used widely in hospitals and health care industries for gas sterilization of medical products. Other industrial uses include the production of antifreeze and polyesters and use as solvents. Workers are exposed to EtO primarily by breathing fumes. Studies in the 1970's of EtO production workers and other chemical workers indicated excess risk of

27. Acute leukemia death rates among males 25 years of age and over: 1979–85



NOTE: Rates are age adjusted.

SOURCE: National Center for Health Statistics: Data from the Compressed Mortality File.

acute leukemia. OSHA has set standards for workplace exposure to EtO (Federal Register, 1988).

Increased risks of leukemias have been reported in the 1970's among farmers and others employed in agricultural industries (Blair et al., 1980). These reports did not distinguish between acute and chronic leukemias. The specific toxic agent is not known. Exposures to pesticides, insecticides, and herbicides are suspected to cause increased risk. These agents contain chemicals known to increase risk in laboratory animals (IARC, 1983). However, the complex nature of each mixture and the uses of multiple mixtures make the identification of specific toxic chemicals difficult. The Environmental Protection Agency recommends use of combinations of protective clothing, gloves, goggles, or respirators, depending on the toxicity of the pesticide.

Geographic Variation

This section focuses on acute lymphoid and myeloid leukemias.

- During the period 1979–85, 19,834 men 25 years of age and over died of acute leukemia in the United States. Of these deaths, the majority (86 percent) were from the myeloid form of the disease which is generally less responsive to chemotherapy. The age- adjusted death rate for acute leukemia among men 25 years and over in the United States during 1979–85 was 4.3 deaths per 100,000. The death rate increases sharply with age from 1.0 death per 100,000 men aged 25–34 years to 11.6 per 100,000 men aged 65–74 years and 27.7 per 100,000 men 85 years of age and over.
- During 1979–85 the age-adjusted death rates for acute leukemia ranged from 2.6 deaths per 100,000 men (District of Columbia) to 6.0 deaths per 100,000 men (Nebraska) among the 47 States with data shown in figure 27.
- Elevated death rates for acute leukemia were found in a group of 10 States in the central United States. Nebraska, Minnesota, Oklahoma, Colorado, Montana, Kansas, and Iowa were among the 10 States with the highest death rates for acute leukemia. Three other central States (North Dakota, Missouri, South Dakota) also had acute leukemia death rates greater than the national average. Seven of the 10 States in the central United States with elevated acute leukemia death rates are also among the 10 States with highest percents of men employed in agriculture. In 1980, the percents of men employed in agriculture in these States ranged from 23 percent in South Dakota to 5.5 percent in Oklahoma (U.S. Bureau of the Census, 1983). (The national average was 4 percent.) The elevated death rates in these States may be due to occupational exposures of farmers or others employed in agricultural industries.
- The other States with relatively high death rates among men for acute leukemia are Maine, Oregon, and California. The high death rates in these States may be due to several factors. The relatively high percentage of workers potentially exposed to benzene in the leather industry in Maine (3.3 versus 1.7 percent nationally) (U.S. Bureau of the Census, 1983) may account for some of the increased death rate in that State.

References

Blair, A., J. F. Fraumeni, Jr., and T. J. Mason. 1980. Geographic patterns of leukemia in the United States. *J Chronic Dis* 33:251–260.

Federal Register. Apr. 6, 1988. Vol. 53, No. 66, 11414–11438.

International Agency for Research on Cancer. 1983. *IARC Monographs on the Evaluation of the Carcinogenic Risk of Chemicals to Humans. Miscellaneous Pesticides.* Vol. 30. France. World Health Organizations.

Linet, M. S. 1985. *The Leukemias: Epidemiologic Aspects.* New York. Oxford University Press.

National Cancer Institute. 1988. *Annual Cancer Statistics Review Including Cancer Trends: 1950–1985.* NIH Pub. No. 88–2789. National Institutes of Health. Washington. U.S. Government Printing Office.

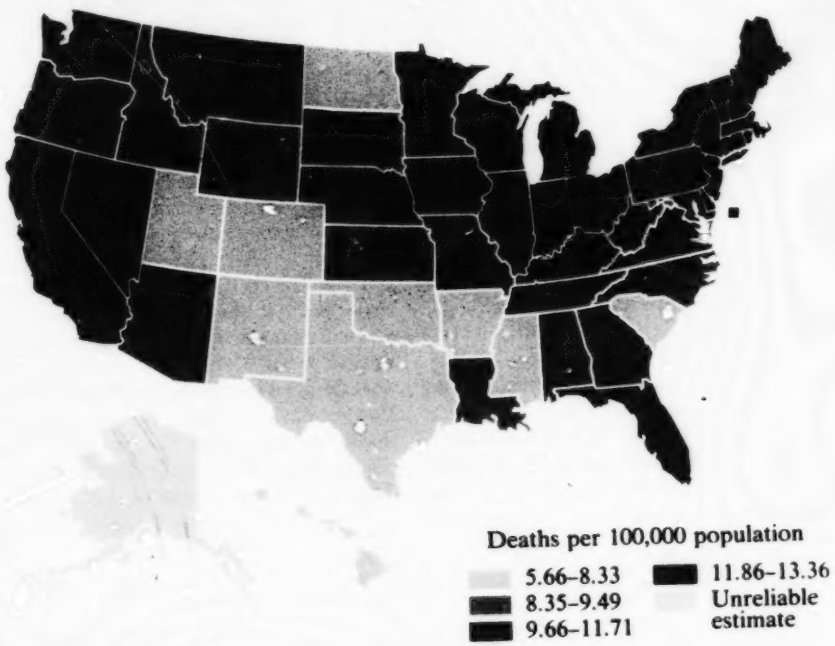
National Institute of Occupational Safety and Health. 1985. *NIOSH Pocket Guide to Chemical Hazards.* DHHS (NIOSH) Pub. No. 85–114. Washington. U.S. Government Printing Office.

Office of Technology Assessment. 1985. *Preventing Illness and Injury in the Workplace.* OTA-H-256. Washington. U.S. Government Printing Office.

U.S. Bureau of the Census. 1983. *1980 Census of Population. Volume 1. Characteristics of the Population.* Chapter C General Social and Economic Characteristics. PC80-1-C2 through C52. Washington. U.S. Government Printing Office.

Bladder Cancer Mortality Among Men

28. Bladder cancer death rates among males 25 years of age and over: 1979–85



NOTE: Rates are age adjusted.

SOURCE: National Center for Health Statistics: Data from the Compressed Mortality File.

Background

Cancer of the urinary bladder is the fourth most frequently occurring cancer among men. The disease is 2½ times more common in men than in women (National Cancer Institute, 1988). Bladder cancer is also more common in the white population; the age-adjusted incidence rates among white persons are 75 percent greater than the rates among black persons. About half of the new cases each year occur in persons 70 years of age and over. Therefore, treatment of bladder cancer is often complicated by other medical conditions. The 10-year trend from 1975–85 shows an 8-percent increase in the incidence of the disease. However, the death rate has decreased by 17 percent during this period, reflecting improved diagnostic and treatment protocols.

The prognosis of the disease depends on the stage of the cancer at the time of diagnosis. In 1979–84, only a 45-percent chance for 5-year survival was reported if the cancer had extended beyond the boundaries of the urinary bladder wall (National Cancer Institute, 1988). However, the prognosis was considerably better if the tumor was confined to the bladder, an 89-percent chance of 5-year survival.

Two factors that increase the risk of developing bladder cancer are smoking and occupational exposure. Smoking is estimated to be responsible for about 40 percent of bladder cancers among men in the United States (U.S. DHHS, 1982; Morrison and Cole, 1982). The increased risk among smokers is probably from aromatic amines produced by incomplete combustion of the tobacco product. An estimated 18–34 percent of all bladder cancers in men may occur from occupational exposures (Morrison and Cole, 1982).

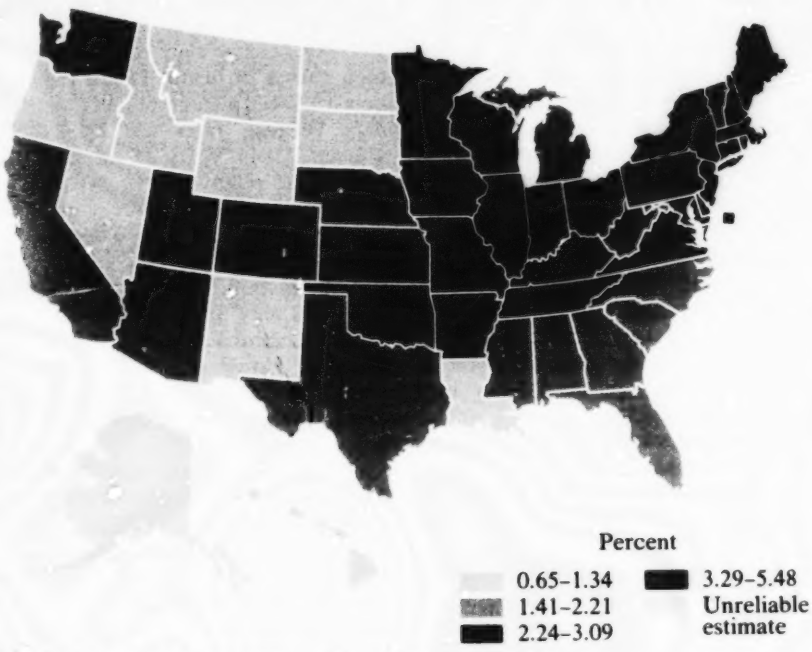
The primary bladder carcinogens to which people are exposed on the job are aromatic amines, a class of chemicals used to make dyes. Two of these chemicals, 2-naphthylamine and benzidine, are known to be potent bladder carcinogens. In the 1930's, the association of increased bladder cancer risk with benzidine or naphthylamine exposure was described using case reports of the 1890's. Since then, numerous studies have noted the increased risk of exposure to bladder carcinogens among rubber industry workers, dye workers, chemical workers, textile dyers, paint-manufacturing workers, nickle refinery workers, copper smelter workers, and printing press operators (OTA, 1985). The workers are exposed by breathing air contaminated with these chemicals, ingestion, or splashes on skin. The 1972–74 National Occupational Hazard Survey found relatively higher risks of potential exposure to benzidine among workers in medical and other health services, chemical manufacturing, and business services (NIOSH, 1978). The same survey found potential exposures to beta-napthylamine among workers in leather tanning and finishing industries. Studies of rubber workers have found that as a group these workers have about a 50-percent increased risk of bladder cancer (Nutt, 1983). However, those workers who receive very high doses of napthylamine can have much higher risks of developing bladder cancer.

The Occupational Safety and Health Administration recognizes a number of the aromatic amines as occupational carcinogens (NIOSH, 1985). Although permissible exposure limits have not been established, workers' exposures to these chemicals are controlled through required use of engineering controls, work practices, and personal protective equipment such as respirators.

Geographic Variation

■ During the period 1979–85, 46,914 men 25 years of age and over died of bladder cancer. This number represents 4.5 percent of all cancer deaths to men during this period. The national age-adjusted death rate for bladder cancer among men 25 years and over during the period 1979–85 was 10.3 deaths per 100,000. The death rate for bladder cancer rises sharply with age from 30.6 deaths per 100,000 among men 65–74 years to 74.6 among men

29. Males 17 years of age and over employed in the printing, rubber, and leather industries: 1980



SOURCE: U.S. Bureau of the Census: 1980 Census of Population.

75–84 years and 141.8 among men 85 years and over.

- The age-adjusted death rates for bladder cancer during 1979–85 vary among the States, ranging from 5.7 deaths per 100,000 men in Hawaii to 13.4 in Vermont (figure 27).
- The death rate for bladder cancer is elevated in the heavily industrialized part of the United States. Seven of the 10 States with the highest age-adjusted death rates are located in the Northeast region (Vermont, Rhode Island, Maine, New Jersey, New York, New Hampshire, Connecticut). The only other State in this region, Pennsylvania, also has a risk of bladder cancer greater than the national average. Other heavily industrialized States with rates above the national average include Delaware, Maryland, Ohio, Michigan, Indiana, Wisconsin, and Illinois.
- States with the lowest age-adjusted bladder cancer death rates among men are found primarily in the Mountain and South Central States.
- The geographic distribution of male employment in three of the industries that use the aromatic amine chemicals shows a pattern similar to that for bladder cancer mortality (figure 29). Six of the 10 States with the highest percentages of men employed in the printing, rubber, or leather industries also rank highest for bladder cancer mortality. The relationship between smoking among these men, actual exposures to bladder carcinogens, and bladder cancer needs to be studied.

References

Morrison, A. S., and P. Cole. 1982. Urinary tract. In D. Schottenfeld and J. F. Fraumeni, Jr., eds. *Cancer Epidemiology and Prevention.* Philadelphia. W. B. Saunders.

National Cancer Institute. 1988. *Annual Cancer Statistics Review Including Cancer Trends: 1950–1985.* DHHS Pub. No. (NIH) 88-2789. National Institutes of Health. Washington. U.S. Government Printing Office.

National Institute of Occupational Safety and Health. 1978. *National Occupational Hazard Survey. Vol. III. Survey Analysis and Supplemental Tables.* DHHS Pub. No. (NIOSH) 78-114. Washington. U.S. Government Printing Office.

National Institute of Occupational Safety and Health. 1985. *NIOSH Pocket Guide to Chemical Hazards.* DHHS (NIOSH) Pub. No. 85-114. Washington. U.S. Government Printing Office.

Nutt, A. 1983. Rubber workers and cancer—Past, present and perspectives. *Scandanavian J Work and Environmental Health.* 9 (suppl. 2): 49–57.

Office of Technology Assessment. 1985. *Preventing Illness and Injury in the Workplace.* OTA-H-256. Washington. U.S. Government Printing Office.

U.S Department of Health and Human Services. 1982. *The Health Consequences of Smoking: Cancer. A Report of the Surgeon General.* DHHS (PHS) 82-50179. Public Health Service. Washington. U.S. Government Printing Office.

Technical Notes

Data Sources

The data on cigarette smoking shown in figures 1 and 2 are from the 1985 Current Population Survey (CPS). This survey is described in appendix I. In September 1985, a supplement to the CPS included questions on tobacco usage for all household members 16 years of age and over. For the first time data on smoking were available for all States in the same year.

The mortality data shown in figures 3–25, 27, and 28 are from the Compressed Mortality File (CMF), a county-level national mortality and population data base (NCHS, 1988). The mortality data base of the CMF is derived from death records compiled through the National Vital Statistics System. The population data base of the CMF is derived from annual estimates for each U.S. county. The population estimates were prepared by the Bureau of the Census with modifications by the National Center for Health Statistics.

The data on employment among males 17 years of age and over, shown in figures 26 and 29, are from the 1980 census. These data are for the "experienced labor force," which includes currently employed men as well as those with past work experience who are looking for work. The industry classification of those men who are looking for work is determined by their most recent jobs.

Age Adjustment

All percents and death rates have been age adjusted to eliminate differences among the States because of differences in their age distributions. Age adjustment by the direct method applies age-specific death rates in each State to a standardized age distribution. However, this method is subject to large error for rare causes of death because age-specific death rates for rare causes of death are highly unstable for many States. In age adjustment by the indirect method, a standardized mortality ratio (SMR) is calculated for each State. The SMR is the ratio of the number of observed deaths in the State to the number of expected deaths in the State, where the expected deaths are determined by applying age-specific death rates for the entire United States to the age distribution in the State. The indirectly age-adjusted death rate is the State's SMR multiplied by the U.S. death rate.

The percent of persons 20 years of age and over who currently smoke cigarettes (figures 1 and 2) have been age adjusted by the direct method to the 1985 U.S. civilian noninstitutionalized population using three age groups (20–44 years, 45–64 years, 65 years and over). Death rates during 1983–85 and 1979–81 for persons in 20-year age groups (figures 5, 6, 9, 10, 13, 14, 17, 18, and 20–22) have been age adjusted by the direct method to the 1940 U.S. population using two 10-year age groups.

Death rates in 1979–85 for selected occupation-related causes of death among men 25 years of age and over (figures 24, 25, 27, and 28) have been age adjusted using the indirect method because of the relatively small numbers of deaths for these causes. Age-specific U.S. death rates during 1979–85 for seven 10-year age groups and for all men 25 years and over were used as the standard death rates.

Average Annual Percent Change in Death Rates

Average annual percent change in death rates between 1970 and 1985 for persons 45–64 years of age (figures 3, 4, 7, and 8) and persons 55–74 years of age (figures 11, 12, 15, 16, and 19) was estimated using regression models. For each estimate in each State a regression model was fit to the logarithm of 32 age-specific death rates (i.e., death rates for two 10-year age groups for the 16 years, 1970–85). A weighted least squares algorithm was used to estimate age and time parameters for each model. The age parameter adjusts for age in 10-year age groups. Average annual percent change was calculated as $(e^B - 1) \times 100$, where B is the estimated regression coefficient of the time parameter.

Selection of States for Figures

Because of the small numbers of expected deaths in the less populous States, certain States are excluded from specific figures. To include as many States as possible, death rates were calculated by combining several years of data. Death rates for heart disease, stroke, and lung cancer combine 3 years of mortality data, 1983–85. Death rates for suicide and for occupation-related causes of death combine 7 years of mortality data, 1979–85, because they are for less common causes of death. Death rates for breast cancer also combine 7 years of data because rates are shown for women 25–44 years of age, an age group with relatively few deaths.

The expected numbers of deaths in a State were calculated based on the State population and U.S. age-race-sex and cause-specific death rates. In figures 3–20 only States with at least 100 expected deaths during 1983–85 are included. However, some States with more than 100 expected deaths are excluded so that related maps include the same States.

Figures 3–6 (heart disease mortality for white males and females) include data for the same 49 States. The District of Columbia and Alaska are excluded because they had fewer than 100 expected heart disease deaths among white females 45–64 years of age during 1983–85. Figures 7–10 (heart disease mortality for minority males and females) include data for the same 32 States.

Figures 11–14 (stroke mortality for white males and females) include data for the same 47 States. The District of Columbia, Alaska, Hawaii, and Wyoming are excluded because they had fewer than 100 expected stroke deaths among white males and females 55–74 years of age during 1983–85. Figures 15–18 (stroke mortality for minority males and females) include data for the same 26 States.

Figures 19 and 20 (lung cancer mortality for females) include data for 50 States. Alaska was excluded.

Figures 21 and 22 (breast cancer mortality), figure 23 (suicide among males 15–24 years) and figures 24, 25, 27, and 28 (occupation-related causes of death) have the less stringent inclusion criteria of 50 or more expected deaths during 1979–85 because average annual percent change during 1970–85 (based on annual death rates) was not calculated for these causes of death. The number of States included in each of these figures are as follows:

Figures 21–23: 51 States
Figure 24: 27 States
Figure 25: 35 States
Figure 27: 47 States
Figure 28: 50 States

Ranking of States

Four categories of States are shown in each figure based on the relative rankings of the variable of interest. States ranking in the lowest and highest quintiles form the first and fourth categories, respectively. The remaining States are divided into two middle categories, each with approximately 30 percent of the States. The number of States included in each of the four categories are shown below for each map. The numbers in each category vary with the total number of States included in the map.

Figure	1	2	3	4
1 and 2	10	15	16	10
3–6	10	14	15	10
7–10	6	10	10	6
11–14	10	13	14	10
15–18	5	8	8	5
19 and 20	10	15	15	10
21–23	10	15	16	10
24	5	8	9	5
25 and 26	7	10	11	7
27	10	13	14	10
28 and 29	10	15	15	10

Reference

National Center for Health Statistics. 1988. *Public Use Data Tape Documentation: Compressed Mortality File 1968-85.* Hyattsville, MD.

Data for Figures 1–29

[See figures 1–29 for variables and sources. Numbers in boxheads refer to figure numbers]

State	1	2	3	4	5	6	7	8	9	10	11	12	13	14
Alabama	38.5	23.5	-3.25	-0.98	430.6	134.1	-0.49	-2.24	581.7	278.9	-6.72	-5.20	127.1	90.5
Alaska	41.3	27.9	•	•	•	•	•	•	•	•	•	•	•	•
Arizona	34.2	25.2	-2.70	-2.41	373.7	112.9	-1.46	-1.35	333.9	149.1	-5.78	-5.45	87.6	68.0
Arkansas	37.4	26.5	-2.51	-0.67	456.8	141.7	-0.78	-1.74	626.2	316.5	-5.36	-4.60	130.2	91.7
California	28.8	22.4	-3.38	-2.88	344.0	110.9	-2.08	-3.12	370.8	165.9	-5.78	-5.03	98.9	79.0
Colorado	30.6	26.9	-3.65	-2.82	304.8	96.2	-3.42	-2.37	335.7	145.8	-6.70	-5.64	77.1	62.3
Connecticut	30.9	28.4	-3.17	-2.14	355.6	112.0	-1.41	-3.49	491.6	227.8	-6.59	-6.46	85.3	62.3
Delaware	34.9	29.1	-3.96	-3.09	382.4	140.5	•	•	•	•	-5.91	-5.83	90.5	67.2
District of Columbia	34.1	29.2	•	•	•	•	-1.55	-1.94	630.2	288.0	•	•	•	•
Florida	35.6	28.4	-3.17	-2.96	376.8	102.8	-2.58	-3.79	514.3	291.2	-5.77	-5.05	92.6	68.5
Georgia	38.7	26.4	-3.37	-1.58	463.9	142.0	-1.94	-3.29	650.6	344.0	-6.50	-5.35	135.9	103.6
Hawaii	30.8	24.7	-3.25	-1.75	321.3	104.7	-1.68	-2.13	266.9	129.6	•	•	•	•
Idaho	26.6	21.7	-2.83	-2.98	362.8	100.6	•	•	•	•	-5.77	-5.26	81.8	78.8
Illinois	31.5	26.3	-3.61	-2.85	421.0	142.3	-3.70	-4.38	599.2	301.8	-6.07	-5.50	109.3	82.1
Indiana	35.7	30.0	-2.83	-1.96	426.9	141.4	-2.09	-3.71	485.3	265.9	-6.43	-5.71	125.9	94.9
Iowa	33.0	23.6	-3.08	-2.44	367.7	113.9	•	•	•	•	-5.87	-5.99	102.0	68.1
Kansas	34.6	26.6	-3.03	-1.66	361.9	112.4	-4.38	-2.10	390.5	256.1	-5.59	-4.57	102.3	74.1
Kentucky	37.7	33.4	-2.49	-1.79	497.1	162.2	-2.74	-3.94	594.3	295.9	-6.11	-5.09	127.8	92.5
Louisiana	35.4	23.8	-3.72	-2.33	441.0	146.7	-1.23	-2.70	642.6	358.8	-5.99	-4.17	116.4	89.9
Maine	31.8	29.0	-3.25	-3.51	419.2	141.6	•	•	•	•	-6.95	-6.38	86.9	79.0
Maryland	31.4	28.1	-3.18	-2.40	413.2	136.0	-2.77	-3.18	507.6	257.0	-5.06	-5.01	102.6	65.2
Massachusetts	28.4	28.0	-2.72	-2.42	429.7	132.1	-2.49	-1.47	401.1	215.1	-6.81	-6.23	92.2	69.6
Michigan	34.4	33.7	-2.48	-1.77	429.8	152.5	-1.19	-2.12	575.2	300.7	-5.56	-5.14	116.0	85.3
Minnesota	30.0	27.4	-3.38	-2.74	336.3	95.8	•	•	•	•	-6.72	-6.07	95.8	66.7
Mississippi	38.8	24.7	-2.50	-0.27	469.8	151.3	-0.58	-1.18	558.0	304.9	-6.37	-4.90	127.8	88.2
Missouri	31.0	24.6	-2.70	-1.52	393.4	131.6	-1.51	-3.85	573.8	266.8	-5.89	-5.38	114.7	81.7
Montana	26.0	25.9	-3.26	-2.47	329.1	117.8	•	•	•	•	-6.26	-5.76	85.9	69.6
Nebraska	26.6	23.6	-2.99	-2.01	347.1	112.4	•	•	•	•	-6.55	-5.37	94.3	73.5
Nevada	37.6	33.9	-2.13	-1.12	435.5	145.6	•	•	•	•	-6.67	-6.65	100.1	85.9
New Hampshire	35.1	26.6	-2.39	-1.86	409.9	125.1	•	•	•	•	-7.77	-7.12	91.0	70.5
New Jersey	31.0	25.2	-3.05	-3.02	415.5	134.0	-2.89	-4.60	500.8	237.1	-5.70	-5.47	102.1	74.0
New Mexico	32.6	24.2	-3.14	-2.85	301.4	100.1	•	•	•	•	-6.93	-5.30	77.4	73.4
New York	31.4	26.3	-2.64	-1.98	439.6	156.8	-2.01	-1.82	511.6	267.1	-5.89	-5.67	90.5	68.5
North Carolina	39.7	24.6	-3.01	-1.75	478.5	129.2	-2.31	-3.78	636.3	290.4	-6.71	-5.13	128.3	87.7
North Dakota	28.3	24.7	-3.52	-2.86	336.4	91.8	•	•	•	•	-5.64	-6.86	109.6	64.7
Ohio	34.4	30.3	-2.85	-1.75	433.4	157.5	-1.47	-2.55	588.1	308.4	-5.95	-5.25	114.7	84.7
Oklahoma	35.7	30.4	-2.43	-1.00	425.7	139.3	-3.27	-3.03	396.4	195.2	-5.68	-4.24	110.5	92.9
Oregon	26.8	27.5	-3.18	-2.13	355.8	118.6	•	•	•	•	-5.75	-5.49	110.4	83.0
Pennsylvania	32.2	26.5	-3.01	-2.73	438.4	152.8	-1.91	-3.48	488.3	235.2	-6.06	-6.07	108.8	79.4
Rhode Island	35.8	33.3	-3.19	-2.98	410.6	130.8	•	•	•	•	-6.05	-6.49	84.1	61.7
South Carolina	34.1	21.5	-3.82	-1.86	466.1	152.0	-2.54	-3.85	668.8	352.8	-6.58	-6.07	146.4	88.0
South Dakota	30.7	26.8	-2.11	-2.11	387.0	103.5	•	•	•	•	-5.73	-4.45	94.6	66.5
Tennessee	36.6	26.0	-3.08	-1.78	452.1	139.9	-1.50	-2.37	665.0	387.1	-5.63	-4.98	137.4	95.9
Texas	35.5	26.2	-3.05	-1.57	378.0	125.6	-1.31	-2.87	573.2	300.0	-5.69	-4.70	110.8	81.4
Utah	18.2	10.2	-2.77	-2.04	315.0	99.3	•	•	•	•	-6.11	-4.83	84.9	72.5
Vermont	31.7	29.7	-2.69	-1.89	401.4	120.4	•	•	•	•	-6.63	-5.88	89.6	73.4
Virginia	37.8	28.5	-3.32	-1.95	414.5	132.3	-2.57	-3.49	562.1	290.6	-6.23	-4.30	110.2	83.4
Washington	29.9	27.3	-3.82	-2.72	337.9	111.9	-3.20	-2.67	370.7	134.6	-6.08	-5.32	103.2	79.4
West Virginia	38.5	29.9	-2.18	-1.73	528.5	192.8	•	•	•	•	-5.91	-5.05	122.7	96.1
Wisconsin	27.6	25.2	-3.38	-1.89	358.6	116.1	-0.62	-2.27	523.3	258.9	-6.30	-5.67	103.4	78.3
Wyoming	31.8	31.9	-4.04	-3.47	313.6	99.9	•	•	•	•	•	•	•	•

15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	State
-5.68	-6.73	298.1	202.8	7.60	93.5	10.6	75.6	15.7	0.95	1.03	1.59	4.47	8.50	2.15	Alabama
•	•	•	•	•	•	5.9	82.9	31.7	•	•	•	•	•	•	Alaska
•	•	•	•	6.66	104.3	8.3	80.8	30.5	0.72	0.49	3.49	4.58	9.32	1.43	Arizona
-4.89	-5.56	340.3	239.2	7.83	91.8	9.0	67.5	19.4	•	0.37	0.50	3.83	7.70	2.31	Arkansas
-5.10	-4.90	142.8	124.4	6.11	125.8	9.5	93.9	20.3	0.82	0.12	0.17	4.68	9.73	2.21	California
•	•	•	•	6.35	82.6	7.7	79.0	26.8	•	0.93	2.10	4.85	8.33	2.21	Colorado
•	•	•	•	6.46	103.9	9.6	99.7	15.4	0.73	0.26	0.12	3.99	11.92	3.09	Connecticut
•	•	•	•	7.13	138.3	12.5	98.7	22.4	•	•	•	•	13.34	2.29	Delaware
-5.11	-5.98	143.1	120.2	5.31	119.5	14.8	111.0	15.8	•	•	•	2.60	11.32	3.48	District of Columbia
-5.79	-6.56	268.9	221.4	6.31	116.4	9.0	81.4	22.3	1.08	0.30	0.44	4.33	10.71	1.61	Florida
-6.15	-6.87	354.3	264.7	8.03	92.5	10.3	72.8	17.3	0.56	0.09	0.52	3.97	9.29	1.88	Georgia
-6.62	-4.70	107.7	84.2	1.56	69.6	8.2	58.5	20.0	•	•	•	3.86	5.66	1.06	Hawaii
•	•	•	•	6.68	78.5	7.5	80.9	28.6	•	•	•	3.33	9.09	0.96	Idaho
-5.13	-6.66	191.0	153.6	6.78	106.0	10.6	97.1	17.2	1.02	0.58	0.81	4.20	10.98	3.49	Illinois
-7.41	-8.18	185.1	168.6	7.59	106.8	9.5	89.7	19.2	0.75	0.44	0.68	4.34	10.29	2.89	Indiana
•	•	•	•	8.23	92.0	6.7	85.9	20.7	1.22	0.27	0.29	4.71	10.82	2.38	Iowa
•	•	•	•	7.66	95.7	8.6	84.2	19.5	•	0.13	0.34	4.72	9.38	2.85	Kansas
-5.95	-6.77	230.2	185.6	8.60	124.8	10.4	80.7	18.8	0.78	4.90	6.41	3.72	9.81	2.32	Kentucky
-4.83	-5.88	261.1	187.0	7.43	116.9	10.6	75.3	21.3	0.56	0.04	0.35	4.12	9.38	0.92	Louisiana
•	•	•	•	6.55	106.3	7.9	92.9	25.3	•	•	•	4.89	12.98	4.98	Maine
-4.30	-4.35	184.8	153.1	6.82	127.7	11.3	95.4	20.6	0.83	0.42	0.21	3.59	11.99	2.82	Maryland
-5.39	-6.59	136.9	76.7	7.05	110.8	9.7	107.1	16.5	0.81	0.01	0.08	4.19	11.45	3.92	Massachusetts
-4.75	-5.01	184.4	163.3	7.48	113.6	10.2	93.7	22.0	0.71	0.25	0.39	4.42	11.17	2.05	Michigan
•	•	•	•	6.92	83.8	8.7	88.4	21.1	0.82	0.05	1.40	4.99	8.98	2.60	Minnesota
-5.28	-5.73	249.0	185.3	7.99	92.6	9.7	67.9	16.2	•	0.06	0.23	3.92	7.69	1.54	Mississippi
-5.21	-7.02	228.0	178.8	7.57	107.3	10.5	83.7	20.4	0.73	0.23	0.68	4.62	9.15	2.87	Missouri
•	•	•	•	6.74	107.6	10.3	84.4	28.7	•	•	•	4.81	11.04	0.88	Montana
•	•	•	•	8.25	87.6	9.0	86.9	19.7	•	0.03	0.20	5.98	9.66	1.87	Nebraska
•	•	•	•	7.77	173.1	8.0	86.8	40.2	•	•	•	3.46	11.71	0.99	Nevada
•	•	•	•	7.49	123.1	9.2	96.8	22.9	•	•	•	3.36	11.96	5.48	New Hampshire
-5.02	-5.68	190.0	157.7	6.23	115.5	11.0	107.0	14.5	1.69	0.34	0.12	4.56	12.70	3.30	New Jersey
•	•	•	•	4.19	83.5	9.3	79.1	42.5	•	•	•	3.36	6.62	0.96	New Mexico
-5.39	-5.80	159.5	119.5	5.95	108.3	10.9	104.1	14.2	1.05	0.12	0.11	4.66	12.46	3.29	New York
-5.71	-7.03	294.1	199.9	8.79	83.4	11.1	79.7	17.4	0.64	0.19	0.28	3.78	5.35	2.04	North Carolina
•	•	•	•	7.50	71.7	9.0	86.7	26.5	•	•	•	4.63	8.19	0.85	North Dakota
-5.88	-5.86	173 8	149.7	7.11	117.4	10.4	98.2	20.2	0.86	1.05	0.80	4.51	11.86	4.14	Ohio
-5.49	-5.40	163.2	111.6	7.11	110.6	8.7	76.3	24.3	0.48	0.11	0.50	4.94	7.70	2.32	Oklahoma
•	•	•	•	8.02	134.4	9.3	86.7	22.6	•	0.07	0.33	4.86	9.30	1.34	Oregon
-5.17	-5.94	199.5	156.3	6.65	102.2	10.3	96.5	20.0	0.86	16.70	1.64	4.56	11.40	2.87	Pennsylvania
•	•	•	•	6.65	114.0	11.2	95.3	20.3	•	•	•	3.82	13.25	3.35	Rhode Island
-5.06	-5.92	401.4	270.3	7.12	82.6	10.7	81.4	15.8	•	0.12	0.21	3.65	8.27	2.17	South Carolina
•	•	•	•	7.36	71.5	10.0	82.0	27.4	•	•	•	4.37	8.43	1.10	South Dakota
-5.34	-6.25	308.8	220.9	8.93	101.6	9.2	76.9	17.7	0.89	0.81	0.88	4.48	9.13	3.56	Tennessee
-5.48	-7.45	233.0	173.2	6.03	99.4	8.9	72.6	22.5	0.58	0.09	0.34	3.75	7.63	1.78	Texas
•	•	•	•	4.39	44.9	7.4	79.0	23.3	•	•	•	3.96	6.08	1.49	Utah
•	•	•	•	7.10	103.7	10.2	89.5	28.6	•	•	•	•	13.36	2.75	Vermont
-5.77	-6.44	246.5	198.0	7.37	116.5	10.6	86.2	19.7	0.73	2.05	1.85	3.95	9.49	2.24	Virginia
•	•	•	•	7.31	127.4	9.5	91.8	22.7	1.71	0.23	0.27	4.08	10.49	1.52	Washington
•	•	•	•	7.08	120.4	9.9	80.7	18.2	•	11.37	14.38	3.99	8.68	1.41	West Virginia
•	•	•	•	7.05	81.9	9.1	93.5	25.7	0.83	0.03	0.18	3.69	10.71	2.97	Wisconsin
•	•	•	•	5.88	87.5	6.8	82.6	37.8	•	•	•	•	8.74	0.65	Wyoming

Detailed Tables

List of Detailed Tables

Health Status and Determinants

Population

1. Resident population, according to age, sex, and race: United States, selected years 1950–86 41

Fertility and Natality

2. Live births, crude birth rates, and birth rates by age of mother, according to race of child: United States, selected years 1950–86 42

3. Birth rates for women 15–44 years of age, according to live-birth order and race of child: United States, selected years 1950–86 43

4. Completed fertility rates and parity distribution for women 50–54 years of age at the beginning of selected years 1930–87, according to race of child and birth cohort: United States, selected birth cohorts 1876–1937 44

5. Lifetime births expected by currently married women and percent of expected births already born, according to age and race: United States, selected years 1967–87 45

6. Characteristics of live births, according to Hispanic origin of mother and race of child: Selected States, 1980–86 46

7. Live births, according to race of child and selected characteristics: United States, selected years 1970–86 47

8. Infants weighing less than 2,500 grams at birth, according to race of child, geographic division, and State: United States, average annual 1974–76, 1979–81 and 1984–86 48

9. Legal abortion ratios, according to selected patient characteristics: United States, selected years 1973–85 49

10. Legal abortions, according to selected characteristics: United States, selected years 1973–85 50

11. Legal abortions, abortion-related deaths and death rates, and relative risk of death, according to period of gestation: United States, 1974–76, 1977–79, 1980–82, and 1983–85 51

12. Methods of contraception for ever-married women 15–44 years of age, according to race and age: United States, 1973, 1976, and 1982 52

Mortality

13. Life expectancy at birth and at 65 years of age, according to race and sex: United States, selected years 1900–1987 53

14. Infant mortality rates, fetal death rates, and perinatal mortality rates, according to race: United States, selected years 1950–87 54

15. Infant mortality rates, according to race, geographic division, and State: United States, average annual 1974–76, 1979–81, and 1984–86 55

16. Neonatal mortality rates, according to race, geographic division, and State: United States, average annual 1974–76, 1979–81, and 1984–86 56

17. Postneonatal mortality rates, according to race, geographic division, and State: United States, average annual 1974–76, 1979–81, and 1984–86 57

18. Fetal death rates, according to race, geographic division, and State: United States, average annual 1974–76, 1979–81, and 1984–86 58

19. Infant mortality rates, perinatal mortality ratios, and average annual percent change: Selected countries, 1980 and 1985 59

20. Life expectancy at birth, according to sex: Selected countries, selected periods 60

21. Death rates for all causes, according to sex, race, and age: United States, selected years 1950–86 61

22. Age-adjusted death rates for selected causes of death, according to sex and race: United States, selected years 1950–86 62

23. Years of potential life lost before age 65 for selected causes of death, according to sex and race: United States, 1980, 1985, and 1986 64

24. Death rates for diseases of heart, according to sex, race, and age: United States, selected years 1950–86 66

25. Death rates for cerebrovascular diseases, according to sex, race, and age: United States, selected years 1950–86 67

26. Death rates for malignant neoplasms, according to sex, race, and age: United States, selected years 1950–86 68

27. Death rates for malignant neoplasms of respiratory system, according to sex, race, and age: United States, selected years 1950–86 69

28. Death rates for malignant neoplasm of breast for females, according to race and age: United States, selected years 1950–86 70

29. Maternal mortality rates for complications of pregnancy, childbirth, and the puerperium, according to race and age: United States, selected years 1950–86 71

30. Death rates for motor vehicle accidents, according to sex, race, and age: United States, selected years 1950–86 72

31. Death rates for homicide and legal intervention, according to sex, race, and age: United States, selected years 1950–86 73

32. Death rates for suicide, according to sex, race, and age: United States, selected years 1950–86 74

33. Deaths for selected occupational diseases for males, according to age: United States, selected years 1970–86 75

34. Provisional death rates for all causes, according to race, sex, and age: United States, 1985–87 76

35. Provisional age-adjusted death rates for selected causes of death: United States, 1985–87 77

36. Provisional death rates for the 3 leading causes of death, according to age: United States, 1985–87 78

Determinants and Measures of Health

37. Progress toward 1990 health promotion goals: 1977–86 79

38. Vaccinations of children 1–4 years of age for selected diseases, according to race and residence in metropolitan statistical area (MSA): United States, 1970, 1976, and 1983–85 80

39. Selected notifiable disease rates, according to disease: United States, selected years 1950–87 81

40. Acquired immunodeficiency syndrome (AIDS) cases, according to age, sex, and race/ethnicity: United States, 1982–88 82

41. Acquired immunodeficiency syndrome (AIDS) deaths, according to age, sex, and race/ethnicity: United States, 1982–88 83

42. Acquired immunodeficiency syndrome (AIDS) cases, according to race/ethnicity, sex, and transmission category for persons 13 years of age and over: United States, 1982–88 84

43. Acquired immunodeficiency syndrome (AIDS) deaths, according to race/ethnicity, sex, and transmission category for persons 13 years of age and over: United States, 1982–88 86

44. Acquired immunodeficiency syndrome (AIDS) cases, according to geographic division and State: United States, 1982–88 88

45. Acquired immunodeficiency syndrome (AIDS) deaths, according to geographic division and State: United States, 1982–88 90

46. Age-adjusted cancer incidence rates for selected cancer sites, according to sex and race: Selected years 1973–86 91

47. Five-year relative cancer survival rates for selected sites, according to race: 1974–76, 1977–79, and 1980–85 92

48. Limitation of activity caused by chronic conditions, according to selected characteristics: United States, 1983 and 1987 93

49. Disability days associated with acute conditions and incidence of acute conditions, according to age: United States, 1982–87 94

50. Self-assessment of health, according to selected characteristics: United States, 1983 and 1987 95

51. Cigarette smoking by persons 20 years of age and over, according to sex, race, and age: United States, 1965, 1976, 1983, and 1987 96

52. Use of selected substances in the past month by youths 12–17 years of age and young adults 18–25 years of age, according to age and sex: United States, selected years 1972–85 97

53. Alcohol consumption status of persons 18 years of age and over, according to sex: United States, selected years 1971–85 98

54. Borderline or definite elevated blood pressure for persons 25–74 years of age, according to race, sex, and age: United States, 1960–62, 1971–74, and 1976–80 99

55. Definite elevated blood pressure for persons 25–74 years of age, according to race, sex, and age: United States, 1960–62, 1971–74, and 1976–80 100

56. High-risk serum cholesterol levels for persons 25–74 years of age, according to race, sex, and age: United States, 1960–62, 1971–74, and 1976–80 101

57. Overweight persons 25–74 years of age, according to race, sex, and age: United States, 1960–62, 1971–74, and 1976–80 102

58. Air pollution, according to source and type of pollutant: United States, selected years 1970–86 103

59. Employees with potential exposure to continuous noise without controls in selected industries, according to size of facility: United States, 1972–74 and 1981–83 104

60. Health and safety services in manufacturing industries, according to size of facility: United States, 1972–74 and 1981–83 105

Utilization of Health Resources

Ambulatory Care

61. Physician contacts, according to place of contact and selected patient characteristics: United States, 1983 and 1987 106

62. Interval since last physician contact, according to selected patient characteristics: United States, 1964, 1982, and 1987 107

63. Office visits to physicians, according to physician specialty and selected patient characteristics: United States, 1980 and 1985 108

64. Office visits to physicians, according to selected patient characteristics: United States, 1980 and 1985 109

65. Dental visits and interval since last visit, according to selected patient characteristics: United States, 1964, 1981, and 1986 110

Inpatient Care

66. Discharges, days of care, and average length of stay in short-stay hospitals, according to selected characteristics: United States, 1964, 1981, and 1987 111

67. Discharges, days of care, and average length of stay in non-Federal short-stay hospitals, according to selected characteristics: United States, 1980–87 112

68. Discharges, days of care, and average length of stay in non-Federal short-stay hospitals for patients discharged with the diagnosis of acquired immunodeficiency syndrome (AIDS) and for all patients: United States, 1984–87 113

69. Rates of discharges and days of care in non-Federal short-stay hospitals, according to sex, age, and selected first-listed diagnosis: United States, 1980, 1985, and 1987 114

70. Discharges and average length of stay in non-Federal short-stay hospitals, according to sex, age, and selected first-listed diagnosis: United States, 1980, 1985, and 1987 116

71. Operations for inpatients discharged from non-Federal short-stay hospitals, according to sex, age, and surgical category: United States, 1980, 1985, and 1987 118

72. Diagnostic and other nonsurgical procedures for inpatients discharged from non-Federal short-stay hospitals, according to sex, age, and procedure category: United States, 1980, 1985, and 1987 120

73. Admissions, average length of stay, and outpatient visits in short-stay hospitals, according to type of ownership: United States, selected years 1960–86 122

74. Nursing home and personal care home residents 65 years of age and over and rate per 1,000 population, according to sex and race: United States, 1963, 1973–74, 1977, and 1985 123

75. Nursing home residents, according to selected functional status and age: United States, 1977 and 1985 124

76. Admissions to mental health organizations and rate per 100,000 civilian population, according to type of service and organization: United States, selected years 1969–86 125

77. Inpatient and residential treatment episodes in mental health organizations, rate per 100,000 civilian population, and inpatient days, according to type of organization: United States, selected years 1969–86 126

78. Admissions to selected inpatient psychiatric organizations and rate per 100,000 civilian population, according to sex, age, and race: United States, selected years 1970–80 127

79. Admissions to selected inpatient psychiatric organizations, according to selected primary diagnoses and age: United States, 1975 and 1980 128

Health Care Resources

Personnel

80. Persons employed in health service sites: United States, selected years 1970–87 129

81. Active non-Federal physicians per 10,000 civilian population, according to geographic division, State, and primary specialty: United States, 1975, 1985, and 1986 130

82. Active physicians, according to type of physician, and number per 10,000 population: United States and outlying U.S. areas, selected 1950–86 estimates and 1990 and 2000 projections 132

83. Physicians, according to activity and place of medical education: United States and outlying U.S. areas, selected years 1970–86 133

84. Active health personnel and number per 100,000 population, according to occupation and geographic region: United States, 1970, 1980, and 1986 134

85. Full-time equivalent employment in selected occupations for community hospitals: United States, 1981 and 1984–86 135

86. First-year enrollment and graduates of health professions schools and number of schools, according to profession: United States, selected 1950–87 estimates and 1990 and 2000 projections 136

87. Total and first-year enrollment of minorities and women in schools for selected health occupations: United States, academic years 1976–77 and 1986–87 137

88. Total and first-year enrollment and percent of women in schools of medicine, according to race and ethnicity: United States, academic years 1971–72, 1977–78, and 1986–87 138

Facilities

89. Short-stay hospitals, beds, and occupancy rates, according to type of ownership: United States, selected years 1960–86 139

90. Long-term hospitals, beds, and occupancy rates, according to type of hospital and ownership: United States, selected years 1970–86 140

91. Inpatient and residential treatment beds in mental health organizations and rate per 100,000 civilian population, according to type of organization: United States, selected years 1970–86 141

92. Community hospital beds per 1,000 population and average annual percent change, according to geographic division and State: United States, selected years 1940–86 142

93. Occupancy rate in community hospitals and average annual percent change, according to geographic division and State: United States, selected years 1940–86 144

94. Full-time equivalent employees per 100 average daily patients in community hospitals and average annual percent change, according to geographic division and State: United States, selected years 1960–86 146

95. Nursing homes with 25 or more beds, beds, and bed rates, according to geographic division and State: United States, 1976, 1982, and 1986 148

Health Care Expenditures

National Health Expenditures

96. Gross national product and national health expenditures: United States, selected years 1929–86 150

97. Total health expenditures as a percentage of gross domestic product: Selected countries, selected years 1960–86 151

98. National health expenditures and percent distribution, according to type of expenditure: United States, selected years 1950–86 152

99. National health expenditures average annual percent change, according to type of expenditure: United States, selected years 1950–86 153

100. Personal health care expenditures average annual percent change and percent distribution of factors affecting growth: United States, 1965–86 154

101. Consumer Price Index and average annual percent change for all items and selected items: United States, selected years 1950–87 155

102. Consumer Price Index for all items and medical care components: United States, selected years 1950–87 156

103. Consumer Price Index average annual percent change for all items and medical care components: United States, selected years 1950–87 157

Sources and Types of Payment

104. Hospital expenses and personnel and average annual percent change: United States, 1971–86 158

105. National health expenditures and average annual percent change, according to source of funds: United States, selected years 1929–86 159

106. Personal health care expenditures and percent distribution, according to source of funds: United States, selected years 1929–86 160

107. Expenditures on hospital care, nursing home care, and physician services and percent distribution, according to source of funds: United States, selected years, 1965–86 161

108. Nursing home average monthly charges per resident and percent of residents, according to primary source of payments and selected facility characteristics: United States, 1977 and 1985 162

109. Nursing home average monthly charges per resident and percent of residents, according to selected facility and resident characteristics: United States, 1964, 1973–74, 1977, and 1985 163

110. National funding for health research and development and average annual percent change, according to source of funds: United States, selected years 1960–87 164

111. Federal obligations for health research and development and percent distribution, according to agency: United States, selected fiscal years 1970–86 165

112. Obligations for human immunodeficiency virus (HIV)-related activities by National Institutes of Health and other Public Health Service agencies: United States, fiscal years 1982–87 166

113. Public health expenditures by State and territorial health agencies, according to source of funds and program area: United States, selected fiscal years 1976–86 167

114. Personal health care per capita expenditures and average annual percent change, according to geographic division and State: United States, selected years 1966–82 168

115. Hospital care per capita expenditures and average annual percent change, according to geographic division and State: United States, selected years 1966–82 169

116. Nursing home care per capita expenditures and average annual percent change, according to geographic division and State: United States, selected years 1966–82 170

Health Care Coverage and Major Federal Programs

117. Health care coverage for persons under 65 years of age, according to type of coverage and selected characteristics: United States, 1980, 1982, and 1986 171

118. Health care coverage for persons 65 years of age and over, according to type of coverage and selected characteristics: United States, 1980, 1982, and 1986 172

119. Health maintenance organizations and enrollment, according to model type, geographic region, and Federal program: United States, selected years 1976–87 173

120. Medicare enrollees and Medicaid recipients and expenditures and percent distribution, according to type of service: United States, selected years 1967–86 174

121. Medicare enrollment, persons served, and reimbursements for Medicare enrollees 65 years of age and over, according to selected characteristics: United States, selected years 1967–86 175

122. Selected rates of non-Federal short-stay hospital utilization and benefit payments for aged and disabled Medicare enrollees, according to geographic division: United States, 1980, 1984, and 1986 176

123. Recipients and Medicaid medical vendor payments, according to basis of eligibility: United States, selected years 1972–87 177

124. Veterans medical care expenditures and percent distribution, according to type of service: United States, selected fiscal years 1965–87 178

125. State mental health agency per capita expenditures for mental health services, by State: United States, fiscal years 1981, 1983, and 1985 179

Symbols

- - -	Data not available
. . .	Category not applicable
-	Quantity zero
0.0	Quantity more than zero but less than 0.05
*	Figure does not meet standards of reliability or precision

Table 1. Resident population, according to age, sex, and race: United States, selected years 1950–86

[Data are based on decennial census updated by data from multiple sources]

Sex, race, and year	Total resident population	Under 1 year	1–4 years	5–14 years	15–24 years	25–34 years	35–44 years	45–54 years	55–64 years	65–74 years	75–84 years	85 years and over
	Number in thousands											
All races												
1950	150,697	3,147	13,017	24,319	22,098	23,759	21,450	17,343	13,370	8,340	3,278	577
1960	179,323	4,112	16,209	35,465	24,020	22,818	24,081	20,485	15,572	10,997	4,633	929
1970	203,212	3,485	13,669	40,746	35,441	24,907	23,088	23,220	18,590	12,435	6,119	1,511
1980	226,546	3,534	12,815	34,942	42,487	37,082	25,635	22,800	21,703	15,581	7,729	2,240
1986	241,096	3,768	14,384	33,860	39,021	42,779	33,070	22,815	22,232	17,332	9,060	2,776
White male												
1950	67,129	1,400	5,845	10,860	9,689	10,430	9,529	7,836	6,180	3,736	1,406	218
1960	78,367	1,784	7,065	15,659	10,483	9,940	10,564	9,114	6,850	4,702	1,875	331
1970	86,721	1,501	5,873	17,667	15,232	10,775	9,979	10,090	7,958	4,916	2,243	487
1980	94,976	1,487	5,402	14,773	18,123	15,940	11,010	9,774	9,151	6,096	2,600	621
1986	99,810	1,565	5,973	14,020	16,289	18,193	14,172	9,663	9,290	6,876	3,062	706
Black male												
1950	7,300	944		1,442	1,162	1,105	1,003	772	460	299	113	
1960	9,114	281	1,082	2,185	1,305	1,120	1,086	891	617	382	137	29
1970	10,748	245	975	2,784	2,041	1,226	1,084	979	739	461	169	46
1980	12,585	269	967	2,614	2,807	1,967	1,235	1,024	854	567	228	53
1986	13,892	289	1,091	2,667	2,759	2,488	1,593	1,092	951	633	262	67
White female												
1950	67,813	1,341	5,599	10,431	9,821	10,851	9,719	7,868	6,168	4,031	1,669	314
1960	80,465	1,714	6,795	15,068	10,596	10,204	11,000	9,364	7,327	5,428	2,441	527
1970	91,028	1,434	5,615	16,912	15,420	11,004	10,349	10,756	8,853	6,366	3,429	890
1980	99,835	1,412	5,127	14,057	17,653	15,896	11,232	10,285	10,325	7,951	4,457	1,440
1986	104,501	1,486	5,674	13,295	15,861	17,852	14,297	10,039	10,351	8,657	5,166	1,825
Black female												
1950	7,745	941		1,446	1,300	1,260	1,112	796	443	322	125	
1960	9,758	283	1,085	2,191	1,404	1,300	1,229	974	663	430	160	38
1970	11,832	243	970	2,773	2,196	1,456	1,309	1,134	868	582	230	71
1980	14,046	266	951	2,578	2,937	2,267	1,488	1,258	1,059	776	360	106
1986	15,413	283	1,058	2,596	2,837	2,797	1,906	1,347	1,155	858	430	145

NOTE: Population figures are census counts as of April 1 for 1950, 1960, 1970, and 1980 and estimates as of July 1 for 1986.

SOURCES: U.S. Bureau of the Census: *1950 Nonwhite Population by Race*. Special Report P-E, No. 3B. Washington. U.S. Government Printing Office, 1951; Population estimates and projections. *Current Population Reports*. Series P-25, Nos. 499 and 1022. Washington. U.S. Government Printing Office, May 1973 and Mar. 1988; U.S. Bureau of the Census, *U.S. Census of Population: 1960, Number of Inhabitants*, PC(1)-A1, United States Summary, 1964. U.S. Bureau of the Census, *U.S. Census of Population: 1970, Number of Inhabitants*, Final Report PC(1)-A1, United States Summary, 1971; Unpublished data from the U.S. Bureau of the Census.

Table 2. Live births, crude birth rates, and birth rates by age of mother, according to race of child: United States, selected years 1950–88

[Data are based on the National Vital Statistics System]

Race of child and year	Live births	Crude birth rate[1]	Age								
			10–14 years	15–17 years	18–19 years	20–24 years	25–29 years	30–34 years	35–39 years	40–44 years	45–49 years
			Live births per 1,000 women								
All races											
1950	3,632,000	24.1	1.0	40.7	132.7	196.6	166.1	103.7	52.9	15.1	1.2
1955	4,097,000	25.0	0.9	44.5	157.9	241.6	190.2	116.0	58.6	16.1	1.0
1960	4,257,850	23.7	0.8	43.9	166.7	258.1	197.4	112.7	56.2	15.5	0.9
1965	3,760,358	19.4	0.8	36.6	124.5	195.3	161.6	94.4	46.2	12.8	0.8
1970	3,731,386	18.4	1.2	38.8	114.7	167.8	145.1	73.3	31.7	8.1	0.5
1975	3,144,198	14.6	1.3	36.1	85.0	113.0	108.2	52.3	19.5	4.6	0.3
1980	3,612,258	15.9	1.1	32.5	82.1	115.1	112.9	61.9	19.8	3.9	0.2
1981	3,629,238	15.8	1.1	32.1	81.7	111.8	112.0	61.4	20.0	3.8	0.2
1982	3,680,537	15.9	1.1	32.4	80.7	111.3	111.0	64.2	21.1	3.9	0.2
1983	3,638,933	15.5	1.1	32.0	78.1	108.3	108.7	64.6	22.1	3.8	0.2
1984	3,669,141	15.5	1.2	31.1	78.3	107.3	108.3	66.5	22.8	3.9	0.2
1985	3,760,561	15.8	1.2	31.1	80.8	108.9	110.5	68.5	23.9	4.0	0.2
1986	3,756,547	15.6	1.3	30.6	81.0	108.2	109.2	69.3	24.3	4.1	0.2
White											
1950	3,108,000	23.0	0.4	31.3	120.5	190.4	165.1	102.6	51.4	14.5	1.0
1955	3,485,000	23.8	0.3	35.4	145.7	235.8	186.6	114.0	56.7	15.4	0.9
1960	3,600,744	22.7	0.4	35.5	154.6	252.8	194.9	109.6	54.0	14.7	0.8
1965	3,123,860	18.3	0.3	27.8	111.9	189.0	158.4	91.6	44.0	12.0	0.7
1970	3,091,264	17.4	0.5	29.2	101.5	163.4	145.9	71.9	30.0	7.5	0.4
1975	2,551,996	13.6	0.6	28.0	74.0	108.2	108.1	51.3	18.2	4.2	0.2
1980	2,886,732	14.9	0.6	25.2	72.1	109.5	112.4	60.4	18.5	3.4	0.2
1981	2,908,669	14.8	0.5	25.1	71.9	106.3	111.3	60.2	18.7	3.4	0.2
1982	2,942,054	14.9	0.6	25.2	70.8	105.9	110.3	63.3	20.0	3.5	0.2
1983	2,904,250	14.6	0.6	24.8	68.3	102.6	108.0	64.0	21.0	3.5	0.2
1984	2,923,502	14.5	0.6	23.9	68.1	101.4	107.7	66.1	21.7	3.5	0.2
1985	2,991,373	14.8	0.6	24.0	70.1	102.8	110.0	68.1	22.7	3.6	0.2
1986	2,970,439	14.5	0.6	23.4	69.8	101.5	108.3	68.9	23.3	3.7	0.2
Black											
1950	602,264	31.9	4.3	- - -	- - -	295.4	218.6	137.1	73.9	21.9	1.1
1955	581,126	27.7	4.3	99.3	227.6	243.1	180.4	111.3	61.9	18.7	1.4
1960	572,362	25.3	5.2	101.4	204.9	202.7	136.3	79.6	41.9	12.5	1.0
1965	511,581	20.7	5.1	85.6	152.4	142.8	102.2	53.1	25.6	7.5	0.5
1980	589,616	22.1	4.3	73.6	138.8	146.3	109.1	62.9	24.5	5.8	0.3
1981	587,797	21.6	4.1	70.6	135.9	141.2	108.3	60.4	24.2	5.6	0.3
1982	592,641	21.4	4.1	71.2	133.3	139.1	106.9	60.4	24.4	5.4	0.4
1983	586,027	20.9	4.1	70.1	130.4	137.7	103.4	59.2	24.7	5.2	0.3
1984	592,745	20.8	4.3	69.7	132.0	137.9	103.2	59.5	24.8	5.1	0.2
1985	608,193	21.1	4.5	69.8	137.1	140.8	105.1	60.7	25.5	4.9	0.3
1986	621,221	21.2	4.6	70.0	141.0	143.7	105.9	62.2	25.5	5.1	0.3

[1] Live births per 1,000 population.

NOTE: Data are based on births adjusted for underregistration for 1950 and 1955 and on registered births for all other years. Beginning in 1970, births to nonresidents of the United States are excluded.

SOURCE: National Center for Health Statistics: *Vital Statistics of the United States, 1988*, Vol. I, Natality. Public Health Service, DHHS, Hyattsville, Md. To be published.

Table 3. Birth rates for women 15–44 years of age, according to live-birth order and race of child: United States, selected years 1950–86

[Data are based on the National Vital Statistics System]

Race of child and year	Total	Live-birth order				
		1	2	3	4	5 or higher
		Live births per 1,000 women 15-44 years of age				
All races						
1950	106.2	33.3	32.1	18.4	9.2	13.2
1955	118.3	32.8	31.8	23.1	13.3	17.3
1960	118.0	31.1	29.2	22.8	14.6	20.3
1965	96.6	29.8	23.4	16.6	10.7	16.1
1970	87.9	34.2	24.2	13.6	7.2	8.7
1975	66.0	28.1	20.9	9.4	3.9	3.7
1980	68.4	29.5	21.8	10.3	3.9	2.9
1981	67.4	29.0	21.6	10.2	3.8	2.8
1982	67.3	28.6	22.0	10.2	3.8	2.6
1983	65.8	27.8	21.5	10.1	3.7	2.6
1984	65.4	27.4	21.7	10.1	3.7	2.6
1985	66.2	27.6	22.0	10.4	3.8	2.5
1986	65.4	27.2	21.6	10.3	3.8	2.5
White						
1950	102.3	33.3	32.3	17.9	8.4	10.4
1955	113.7	32.6	32.0	22.9	12.6	13.6
1960	113.2	30.8	29.2	22.7	14.1	16.4
1965	91.4	28.9	23.0	16.2	10.2	13.1
1970	84.1	32.9	23.7	13.3	6.8	7.4
1975	62.5	26.7	20.3	8.8	3.5	3.1
1980	64.7	28.4	21.0	9.5	3.4	2.4
1981	63.9	28.1	20.9	9.4	3.3	2.3
1982	63.9	27.7	21.3	9.5	3.3	2.2
1983	62.4	26.8	20.9	9.4	3.3	2.1
1984	62.2	26.4	21.1	9.4	3.2	2.0
1985	63.0	26.5	21.4	9.7	3.3	2.0
1986	61.9	26.0	20.9	9.6	3.3	1.9
Black						
1960	153.5	33.6	29.3	24.0	18.6	48.0
1965	133.9	35.7	26.2	19.4	14.6	38.0
1970	115.4	43.3	27.1	16.1	10.0	18.9
1975	87.9	36.9	24.2	12.6	6.3	8.0
1980	86.1	35.2	25.7	14.5	6.7	6.0
1981	85.4	33.8	25.2	14.3	6.6	5.7
1982	84.1	33.0	24.9	14.2	6.5	5.4
1983	81.7	32.3	24.1	13.7	6.3	5.2
1984	81.4	32.2	24.1	13.7	6.3	5.1
1985	82.2	32.4	24.5	13.9	6.3	5.1
1986	82.4	32.5	24.5	14.1	6.3	4.9

NOTE: Data are based on births adjusted for underregistration for 1950 and 1955 and on registered births for all other years. Beginning in 1970, births to nonresidents of the United States are excluded. Figures for live-birth order not stated are distributed.

SOURCE: National Center for Health Statistics: *Vital Statistics of the United States, 1986*, Vol. I, Natality. Public Health Service, DHHS, Hyattsville, Md. To be published.

Table 4. Completed fertility rates and parity distribution for women 50–54 years of age at the beginning of selected years 1930–87, according to race of child and birth cohort: United States, selected birth cohorts 1876–1937

[Data are based on the National Vital Statistics System]

Race of child and birth cohort of mother	Age 50–54 as of January 1,—	Completed fertility rate[1]	Parity (number of children born alive)								
			Total	0	1	2	3	4	5	6	7 or more
			Distribution of women[2]								
All races											
1876–80	1930	3,531.9	1,000.0	216.8	123.2	132.0	114.0	93.0	72.0	64.5	184.5
1886–90	1940	3,136.8	1,000.0	210.4	148.5	153.2	129.7	99.5	68.0	55.4	135.3
1896–1900	1950	2,675.9	1,000.0	194.6	200.7	195.2	130.6	87.8	53.5	41.5	90.1
1906–10	1960	2,285.8	1,000.0	215.6	225.1	218.7	131.4	77.5	44.6	29.2	57.9
1916–20	1970	2,574.0	1,000.0	149.0	179.0	251.7	174.6	102.8	55.8	32.0	55.1
1921–25	1975	2,856.9	1,000.0	108.5	152.1	248.7	197.0	123.5	68.0	39.5	62.7
1926–30	1980	3,079.2	1,000.0	105.5	113.7	226.5	209.6	143.5	81.9	47.6	71.7
1927–31	1981	3,118.0	1,000.0	104.1	107.4	222.4	212.0	147.5	84.6	49.2	72.8
1928–32	1982	3,152.7	1,000.0	101.1	102.2	219.7	214.7	151.3	87.0	50.8	73.2
1929–33	1983	3,182.8	1,000.0	96.3	98.9	218.0	217.7	154.9	89.2	52.0	73.0
1930–34	1984	3,199.7	1,000.0	91.5	96.8	217.8	220.9	157.9	90.7	52.6	71.8
1931–35	1985	3,201.4	1,000.0	87.2	96.3	218.8	224.0	160.0	91.4	52.5	69.8
1932–36	1986	3,182.4	1,000.0	84.8	97.0	221.0	226.9	160.8	91.3	51.7	66.5
1933–37	1987	3,146.4	1,000.0	84.0	98.7	224.4	229.5	160.6	90.2	50.2	62.4
White											
1876–80	1930	3,444.4	1,000.0	218.2	121.9	136.1	116.9	94.8	74.0	64.2	173.9
1886–90	1940	3,092.9	1,000.0	209.1	144.3	160.3	132.4	100.2	70.3	54.8	128.6
1896–1900	1950	2,631.5	1,000.0	193.1	192.1	205.9	141.4	89.0	55.2	41.1	82.2
1906–10	1960	2,248.9	1,000.0	207.9	218.0	233.2	138.8	79.6	44.7	28.0	49.8
1916–20	1970	2,526.7	1,000.0	134.6	175.9	268.7	185.1	106.5	55.3	30.3	43.6
1921–25	1975	2,793.7	1,000.0	94.2	150.6	264.6	208.8	127.9	67.9	36.9	49.1
1926–30	1980	2,986.0	1,000.0	94.1	114.1	240.2	222.3	148.8	81.2	44.5	54.8
1927–31	1981	3,023.6	1,000.0	92.5	108.2	235.8	224.9	153.0	83.9	46.0	55.6
1928–32	1982	3,058.1	1,000.0	89.5	103.2	232.9	227.6	157.2	86.5	47.2	55.9
1929–33	1983	3,087.2	1,000.0	85.0	99.8	231.2	230.5	161.1	88.6	48.2	55.6
1930–34	1984	3,102.5	1,000.0	81.2	97.6	230.5	233.6	164.1	90.0	48.5	54.5
1931–35	1985	3,101.3	1,000.0	78.5	96.8	231.1	236.4	166.0	90.5	48.2	52.5
1932–36	1986	3,079.9	1,000.0	77.9	97.0	232.9	239.2	166.3	89.9	47.3	49.5
1933–37	1987	3,042.4	1,000.0	78.6	98.5	236.2	241.6	165.5	88.1	45.5	46.0
All other											
1876–80	1930	4,254.7	1,000.0	207.7	134.0	99.5	87.4	79.9	54.7	64.8	272.0
1886–90	1940	3,451.4	1,000.0	231.9	175.9	105.9	96.6	93.3	52.4	58.0	186.0
1896–1900	1950	2,967.7	1,000.0	227.4	255.0	114.1	97.5	74.3	38.8	42.6	150.3
1906–10	1960	2,529.1	1,000.0	287.5	266.6	114.5	73.2	60.1	43.5	35.6	119.0
1916–20	1970	2,924.2	1,000.0	266.2	202.0	120.9	91.2	72.5	57.8	44.9	144.5
1921–25	1975	3,315.9	1,000.0	217.7	163.5	131.7	108.2	89.0	68.7	56.4	164.8
1926–30	1980	3,718.9	1,000.0	187.4	110.8	130.2	121.0	106.4	85.7	69.3	189.2
1927–31	1981	3,756.0	1,000.0	185.7	102.5	129.1	123.0	109.1	88.1	71.4	191.0
1928–32	1982	3,779.4	1,000.0	181.6	96.7	129.4	126.5	111.4	90.2	73.5	190.7
1929–33	1983	3,805.0	1,000.0	172.4	93.2	132.3	130.1	114.4	93.1	75.1	189.4
1930–34	1984	3,822.3	1,000.0	160.3	92.2	136.0	135.3	117.5	95.5	76.9	186.3
1931–35	1985	3,836.2	1,000.0	145.1	93.4	140.8	140.4	121.8	98.2	78.4	181.9
1932–36	1986	3,830.3	1,000.0	131.0	96.4	145.5	145.5	125.9	100.5	79.9	175.3
1933–37	1987	3,805.7	1,000.0	119.4	99.8	150.3	150.2	129.9	102.4	80.6	167.4

[1]Number of children born alive to each 1,000 women who have completed their reproductive histories (women 50–54 years of age).
[2]Proportional distribution of each 1,000 women in the cohort by the number of children born alive to them.

NOTES: Example of use of table—For every 1,000 women 50–54 years of age in 1981, an average of 3,118.0 children were born alive (about 3 children per woman). About 10 percent of the women in this cohort reached 50–54 years of age having had no children, about 11 percent had 1 child, and about 12 percent had 6 children or more. There is a small discontinuity between 1980 and 1981 in the central birth rates, which are the basis for the cumulative birth rates, because of a change in the population bases. The impact of this change on the cumulative rates is negligible.

SOURCES: National Center for Health Statistics: *Fertility Tables for Birth Cohorts by Color, United States, 1917–73* by R. Heuser. DHEW Pub. No. (HRA) 76-1152. Health Resources Administration. Washington. U.S. Government Printing Office, Apr. 1976; Data computed from *Vital Statistics of the United States, 1986*, Vol. I, Natality. Public Health Service, DHHS, Hyattsville, Md. To be published.

Table 5. Lifetime births expected by currently married women and percent of expected births already born, according to age and race: United States, selected years 1967–87

[Data are based on reporting of birth expectations by currently married women of the civilian noninstitutionalized population]

Race and year	All ages 18-34 years	18–19 years	20–21 years	22–24 years	25–29 years	30–34 years
			Expected births per currently married woman			
All races						
1967	3.1	2.7	2.9	2.9	3.0	3.3
1971	2.6	2.3	2.4	2.4	2.6	3.0
1975	2.3	2.2	2.2	2.2	2.3	2.6
1980	2.2	2.1	2.2	2.1	2.2	2.2
1985	2.2	2.1	2.2	2.2	2.2	2.2
1986	2.3	2.2	2.2	2.3	2.3	2.2
1987	2.2	2.1	2.2	2.2	2.2	2.2
White						
1967	3.0	2.7	3.0	2.8	3.0	3.2
1971	2.6	2.3	2.4	2.4	2.6	2.9
1975	2.3	2.2	2.1	2.1	2.2	2.6
1980	2.2	2.1	2.2	2.1	2.1	2.2
1985	2.2	2.0	2.2	2.2	2.2	2.1
1986	2.2	2.1	2.2	2.3	2.2	2.2
1987	2.2	2.0	2.2	2.2	2.2	2.2
Black						
1967	3.5	*	2.5	3.0	3.4	4.3
1971	3.1	*	2.4	2.8	3.1	3.7
1975	2.8	*	2.6	2.5	2.6	3.2
1980	2.4	*	2.2	2.1	2.4	2.5
1985	2.4	*	*	2.3	2.3	2.5
1986	2.4	*	*	2.4	2.3	2.6
1987	2.3	*	*	2.2	2.3	2.3
			Percent of expected births already born			
All races						
1967	70.2	26.9	33.2	47.8	76.1	92.7
1971	69.4	25.3	32.5	46.7	74.4	93.7
1975	68.8	27.5	30.7	43.9	70.9	93.0
1980	67.0	29.5	32.9	44.9	64.7	89.7
1985	64.2	27.0	30.9	41.8	60.2	84.4
1986	64.7	29.0	30.4	41.8	59.5	84.8
1987	66.5	27.8	36.4	43.0	62.0	82.8
White						
1967	68.9	24.2	30.1	46.2	75.1	92.9
1971	68.9	23.7	31.4	45.3	74.1	93.8
1975	68.2	24.9	29.4	42.3	70.5	93.2
1980	66.3	28.6	31.8	43.5	64.0	90.0
1985	63.3	25.7	30.6	40.4	59.4	84.1
1986	63.8	28.6	28.7	40.5	58.6	84.8
1987	65.6	27.0	36.0	42.0	60.9	83.6
Black						
1967	82.8	*	65.7	67.9	87.9	92.3
1971	74.8	*	43.0	57.5	81.0	93.4
1975	76.4	*	43.3	61.0	78.2	91.8
1980	74.7	*	46.1	58.9	73.8	90.9
1985	77.1	*	*	62.3	72.8	91.4
1986	75.7	*	*	59.7	70.2	90.0
1987	77.8	*	*	55.4	76.6	89.7

SOURCES: U.S. Bureau of the Census: Population characteristics. *Current Population Reports.* Series P-20, Nos. 301, 375, 406, 421, and 427. Washington. U.S. Government Printing Office, Nov. 1976, Oct. 1982, June 1986, Dec. 1987, and May 1988.

Table 6. Characteristics of live births, according to Hispanic origin of mother and race of child: Selected States, 1980–86

[Data are based on the National Vital Statistics System]

Ethnicity of mother, race of child, and characteristic	*1980*	*1981*	*1982*	*1983*	*1984*	*1985*	*1986*
				Percent of live births			
Birth weight less than 2,500 grams							
All origins[1]	6.9	6.8	6.8	6.9	6.8	6.8	6.9
Hispanic	6.1	6.1	6.2	6.3	6.2	6.2	6.1
Mexican	5.6	5.6	5.7	5.8	5.7	5.8	5.6
Puerto Rican	8.9	9.0	9.1	8.9	8.9	8.7	9.2
Cuban	5.6	5.8	5.8	5.6	5.9	6.0	5.5
Non-Hispanic white	5.7	5.6	5.6	5.6	5.5	5.6	5.6
Non-Hispanic black	12.5	12.6	12.4	12.6	12.4	12.4	12.7
Age of mother less than 20 years							
All origins[1]	15.6	14.8	14.4	13.8	13.2	12.8	12.7
Hispanic	19.0	18.5	18.3	17.7	17.0	16.5	16.4
Mexican	19.8	19.4	19.1	18.4	18.0	17.5	17.4
Puerto Rican	23.3	23.1	23.0	22.4	21.3	20.9	20.9
Cuban	13.0	12.8	11.4	9.4	8.2	7.1	6.8
Non-Hispanic white	12.5	11.8	11.3	10.7	10.0	9.7	9.5
Non-Hispanic black	26.9	25.5	24.9	24.3	23.8	23.1	22.8
Unmarried mothers							
All origins[1]	19.3	19.7	20.3	21.3	21.9	22.9	24.3
Hispanic	23.8	24.5	25.6	27.5	28.3	29.5	31.6
Mexican	20.5	20.7	21.9	23.7	24.2	25.7	27.9
Puerto Rican	46.3	48.0	49.0	49.5	50.8	51.1	52.6
Cuban	10.0	14.3	15.9	16.2	16.2	16.1	15.8
Non-Hispanic white	9.3	9.8	10.2	10.7	11.3	12.1	13.2
Non-Hispanic black	56.5	57.1	58.0	59.5	60.5	61.0	62.2
Prenatal care began during 1st trimester							
All origins[1]	74.7	74.8	74.5	74.6	74.9	74.5	74.3
Hispanic	60.2	60.6	61.0	61.0	61.5	61.2	60.3
Mexican	59.6	60.1	60.7	60.2	60.4	60.0	58.9
Puerto Rican	55.1	54.2	54.5	55.1	57.4	58.3	57.2
Cuban	82.7	80.1	79.3	81.2	82.2	82.5	81.8
Non-Hispanic white	81.3	81.4	81.2	81.5	81.7	81.5	81.6
Non-Hispanic black	61.1	61.1	60.1	60.3	61.0	60.5	60.6

[1] Includes origin not stated.

NOTES: Data available only for States with an Hispanic-origin item on their birth certificates. In 1980, there were 22 States; in 1982, 23 States; and since 1983, 23 States and the District of Columbia. About 90 percent of the total U.S. Hispanic population resided in these States in 1986.

SOURCES: National Center for Health Statistics: Births of Hispanic parentage, 1980. *Monthly Vital Statistics Report.* Vol. 32, No. 6 Supp. DHHS Pub. No. (PHS) 83-1120. Sept. 1983; Births of Hispanic parentage, 1981. *Monthly Vital Statistics Report.* Vol. 33, No. 6 Supp. DHHS Pub. No. (PHS) 85-1120. Dec. 1984; Births of Hispanic parentage, 1982. *Monthly Vital Statistics Report.* Vol. 34, No. 4 Supp. DHHS Pub. No. (PHS) 85-1120. July 23, 1985; Births of Hispanic parentage, 1983 and 1984. *Monthly Vital Statistics Report.* Vol. 36, No. 4 Supp. (2). DHHS Pub. No. (PHS) 87-1120. July 24, 1987; Births of Hispanic parentage, 1985. *Monthly Vital Statistics Report.* Vol. 36, No. 11 Supp. DHHS Pub. No. (PHS) 88-1120. Feb. 26, 1988; for 1986, Public Health Service. Hyattsville, Md. To be published.

Table 7. Live births, according to race of child and selected characteristics: United States, selected years 1970–86

[Data are based on the National Vital Statistics System]

Race of child and characteristic	1970	1975	1980	1981	1982	1983	1984	1985	1986
	Percent of live births								
All races									
Birth weight:[1]									
Less than 2,500 grams	7.94	7.39	6.84	6.81	6.75	6.82	6.72	6.75	6.81
Less than 1,500 grams	1.17	1.16	1.15	1.16	1.18	1.19	1.19	1.21	1.21
Age of mother:									
Less than 18 years	6.3	7.6	5.8	5.4	5.2	5.0	4.8	4.7	4.8
18–19 years	11.3	11.3	9.8	9.4	9.0	8.7	8.3	8.0	7.8
Unmarried mothers	10.7	14.3	18.4	18.9	19.4	20.3	21.0	22.0	23.4
Education of mother:									
Less than 12 years	30.8	28.6	23.7	22.9	22.3	21.7	20.9	20.6	20.4
16 years or more	8.6	11.4	14.0	14.8	15.3	15.9	16.4	16.7	17.1
Prenatal care began:									
1st trimester	68.0	72.4	76.3	76.3	76.1	76.2	76.5	76.2	75.9
3rd trimester or no prenatal care	7.9	6.0	5.1	5.2	5.5	5.6	5.6	5.7	6.0
White									
Birth weight:[1]									
Less than 2,500 grams	6.84	6.26	5.70	5.67	5.63	5.67	5.59	5.64	5.64
Less than 1,500 grams	0.95	0.92	0.90	0.90	0.92	0.93	0.92	0.94	0.93
Age of mother:									
Less than 18 years	4.8	6.0	4.5	4.3	4.1	3.9	3.7	3.7	3.7
18–19 years	10.4	10.3	9.0	8.6	8.2	7.9	7.4	7.1	6.9
Unmarried mothers	5.7	7.3	11.0	11.6	12.1	12.8	13.4	14.5	15.7
Education of mother:									
Less than 12 years	27.0	25.0	20.7	19.9	19.3	18.7	18.0	17.8	17.6
16 years or more	9.5	12.7	15.6	16.4	17.0	17.7	18.4	18.7	19.2
Prenatal care began:									
1st trimester	72.4	75.9	79.3	79.4	79.3	79.4	79.6	79.4	79.2
3rd trimester or no prenatal care	6.2	5.0	4.3	4.3	4.5	4.6	4.7	4.7	5.0
Black									
Birth weight:[1]									
Less than 2,500 grams	13.86	13.09	12.49	12.53	12.40	12.59	12.36	12.42	12.53
Less than 1,500 grams	2.40	2.37	2.44	2.47	2.51	2.55	2.56	2.65	2.66
Age of mother:									
Less than 18 years	14.7	16.1	12.2	11.4	11.1	10.9	10.6	10.3	10.4
18–19 years	16.6	16.8	14.3	13.9	13.5	13.4	13.1	12.7	12.4
Unmarried mothers	37.4	49.0	55.2	56.0	56.7	58.2	59.2	60.1	61.2
Education of mother:									
Less than 12 years	51.0	45.1	36.2	35.4	34.8	34.2	33.1	32.3	31.7
16 years or more	2.8	4.4	6.3	6.6	6.8	6.8	7.0	7.1	7.3
Prenatal care began:									
1st trimester	44.4	55.8	62.7	62.4	61.5	61.5	62.2	61.8	61.6
3rd trimester or no prenatal care	16.6	10.5	8.8	9.1	9.6	9.7	9.6	10.0	10.6
Asian and Pacific Islander[2]									
Birth weight:[1]									
Less than 2,500grams	8.43	7.04	6.55	6.61	6.63	6.51	6.53	6.11	6.38
Less than 1,500 grams	1.12	0.80	0.91	0.91	0.87	0.87	0.91	0.84	0.87
Age of mother:									
Less than 18 years	3.3	2.7	1.7	1.8	1.8	1.7	1.8	1.8	1.9
18–19 years	7.1	5.8	4.3	4.4	4.4	3.9	3.8	3.7	3.7
Unmarried mothers	7.8	8.5	7.8	7.5	8.4	9.0	9.6	10.1	10.6
Education of mother:									
Less than 12 years	21.7	18.5	20.0	21.9	22.2	20.7	19.3	18.5	17.3
16 years or more	20.0	27.5	30.2	29.0	28.9	29.7	30.2	30.1	31.1
Prenatal care began:									
1st trimester	67.8	73.9	74.7	74.4	74.4	74.9	75.6	75.0	75.6
3rd trimester or no prenatal care	6.8	4.5	6.1	6.2	6.2	6.1	6.0	6.1	5.9
American Indian[3]									
Birth weight:[1]									
Less than 2,500 grams	7.99	6.61	6.47	6.27	6.17	6.43	6.16	5.88	6.16
Less than 1,500 grams	0.96	1.04	0.96	0.90	1.04	1.06	1.03	0.98	1.01
Age of mother:									
Less than 18 years	7.5	11.0	8.8	8.5	8.0	7.9	7.4	7.1	7.4
18–19 years	13.3	15.8	14.3	14.0	13.5	12.9	12.6	12.0	11.8
Unmarried mothers	19.8	27.9	33.5	35.2	36.3	38.7	39.8	40.7	42.3
Education of mother:									
Less than 12 years	57.6	50.6	41.8	40.7	39.5	38.8	38.0	36.9	36.8
16 years or more	3.0	2.8	4.2	4.4	4.5	4.3	4.5	4.6	4.6
Prenatal care began:									
1st trimester	41.7	49.3	58.7	59.3	60.5	59.7	60.0	60.3	60.7
3rd trimester or no prenatal care	25.6	19.5	13.3	12.9	12.4	12.7	12.4	11.5	11.6

[1] Before 1979, data are for infants weighing 2,500 grams or less at birth.
[2] Includes Chinese, Japanese, Filipino, Hawaiian (includes part Hawaiian), Guamian (1970 and 1975), and other Asian or Pacific Islander (starting in 1980).
[3] Includes Aleut and Eskimo.

NOTE: Data on education of mother are not available from California, Texas, and Washington. Other States do not have data on marital status, education, and/or month prenatal care began for certain years before 1980.

SOURCE: National Center for Health Statistics: *Vital Statistics of the United States*, Vol. I, Natality, for data years 1970–85. Public Health Service. Washington. U.S. Government Printing Office; for 1986, Public Health Service. To be published. Data computed by the Division of Analysis from data compiled by the Division of Vital Statistics.

Table 8. Infants weighing less than 2,500 grams at birth, according to race of child, geographic division, and State: United States, average annual 1974–76, 1979–81, and 1984–86

[Data are based on the National Vital Statistics System]

Geographic division and State	All races			White			Black		
	1974–76[1]	1979–81	1984–86	1974–76[1]	1979–81	1984–86	1974–76[1]	1979–81	1984–86
	Infants weighing less than 2,500 grams at birth per 100 total live births								
United States	7.4	6.9	6.8	6.2	5.7	5.6	13.1	12.5	12.4
New England	6.7	6.2	5.9	6.3	5.8	5.5	12.1	11.8	11.7
Maine	6.1	5.7	5.2	6.1	5.7	5.2	*	*	*
New Hampshire	6.5	5.4	5.1	6.5	5.4	5.0	*	*	*
Vermont	6.4	6.1	5.7	6.4	6.1	5.7	*	*	*
Massachusetts	6.6	6.0	5.8	6.3	5.6	5.4	10.9	11.0	10.7
Rhode Island	6.7	6.3	6.3	6.4	5.8	5.8	*12.2	*11.4	*11.4
Connecticut	7.1	6.9	6.6	6.3	6.0	5.6	13.4	13.1	13.1
Middle Atlantic	7.8	7.1	6.9	6.5	5.9	5.6	13.7	12.8	12.5
New York	8.0	7.5	7.1	6.7	6.1	5.7	13.4	12.5	12.1
New Jersey	7.8	7.2	6.9	6.4	5.7	5.5	13.8	13.1	12.4
Pennsylvania	7.3	6.6	6.7	6.3	5.6	5.6	14.2	13.4	13.7
East North Central	7.2	6.8	6.7	6.0	5.5	5.4	13.5	13.3	13.2
Ohio	7.2	6.7	6.6	6.3	5.7	5.6	13.3	13.0	12.1
Indiana	6.5	6.4	6.4	5.9	5.6	5.7	11.8	12.2	11.8
Illinois	7.7	7.4	7.2	6.0	5.5	5.4	13.9	13.9	13.8
Michigan	7.4	6.9	6.9	6.2	5.7	5.4	13.6	13.2	13.9
Wisconsin	5.9	5.4	5.3	5.5	4.8	4.6	12.4	12.7	12.3
West North Central	6.3	5.7	5.7	5.7	5.2	5.1	13.3	12.4	12.2
Minnesota	5.5	5.2	4.9	5.4	4.9	4.7	*12.8	*11.5	11.2
Iowa	5.7	5.0	5.1	5.6	4.8	4.9	*12.0	*11.1	*11.0
Missouri	7.3	6.7	6.7	6.1	5.6	5.6	13.7	12.7	12.7
North Dakota	5.3	4.8	4.9	5.1	4.7	4.7	*	*	*
South Dakota	6.0	5.2	5.3	5.7	4.9	5.0	*	*	*
Nebraska	6.0	5.5	5.4	5.7	5.2	5.0	*12.1	*12.6	*11.6
Kansas	6.4	6.1	6.1	5.9	5.6	5.5	13.0	12.1	12.1
South Atlantic	8.3	8.0	7.8	6.4	6.1	5.9	13.0	12.5	12.4
Delaware	7.8	7.7	7.4	6.2	5.6	5.9	13.4	14.5	12.2
Maryland	8.0	7.9	7.6	6.2	5.9	5.4	13.1	12.4	12.4
District of Columbia	12.7	12.9	12.7	*6.8	*6.0	5.1	13.8	14.3	14.6
Virginia	7.6	7.4	7.1	6.2	5.9	5.6	12.5	12.0	11.6
West Virginia	7.3	6.8	6.9	7.2	6.6	6.7	*11.4	*12.4	*12.3
North Carolina	8.5	8.0	7.9	6.6	6.1	6.1	13.1	12.3	12.4
South Carolina	9.0	8.8	8.6	6.4	6.1	6.1	13.1	12.7	12.7
Georgia	8.9	8.6	8.1	6.6	6.2	6.0	13.1	12.6	12.2
Florida	8.0	7.6	7.5	6.3	6.0	6.0	12.8	12.1	12.3
East South Central	8.1	7.8	7.9	6.5	6.2	6.3	12.4	12.2	12.2
Kentucky	7.2	6.9	7.0	6.7	6.4	6.5	12.2	11.9	12.3
Tennessee	7.9	8.0	7.9	6.5	6.4	6.4	13.1	13.3	12.9
Alabama	8.4	7.9	8.0	6.4	5.7	5.9	12.2	11.9	12.0
Mississippi	9.1	8.7	8.7	6.3	5.7	6.0	12.3	11.9	11.9
West South Central	7.9	7.3	7.1	6.6	6.0	5.9	13.3	12.5	12.5
Arkansas	8.1	7.4	7.7	6.8	5.8	6.3	12.7	12.1	12.3
Louisiana	9.1	8.6	8.6	6.5	6.0	5.8	13.0	12.7	13.1
Oklahoma	7.6	6.6	6.4	7.0	6.1	5.9	14.1	11.8	11.6
Texas	7.6	7.0	6.8	6.6	6.0	5.9	13.5	12.6	12.2
Mountain	7.2	6.6	6.6	7.0	6.4	6.4	13.3	12.2	12.2
Montana	6.9	5.6	5.8	6.7	5.5	5.7	*	*	*
Idaho	5.8	5.2	5.3	5.8	5.2	5.2	*	*	*
Wyoming	8.9	7.1	7.0	8.7	7.0	7.0	*	*	*
Colorado	8.9	8.1	7.7	8.7	7.8	7.3	14.7	13.6	13.6
New Mexico	8.5	7.7	7.2	8.5	7.7	7.4	*12.5	*11.8	*9.7
Arizona	6.5	6.1	6.2	6.3	5.9	6.0	*11.6	11.3	11.8
Utah	5.4	5.3	5.6	5.4	5.3	5.5	*	*	*
Nevada	7.7	6.9	7.0	7.0	6.3	6.2	*14.0	*12.1	*12.2
Pacific	6.2	5.8	5.8	5.5	5.1	5.1	11.5	11.1	11.6
Washington	5.8	5.2	5.2	5.5	4.9	4.8	10.3	10.0	10.5
Oregon	5.6	5.0	5.1	5.4	4.8	5.0	*12.1	*10.5	*10.8
California	6.2	5.9	6.0	5.6	5.2	5.2	11.8	11.2	11.7
Alaska	5.3	5.3	4.8	4.9	4.9	4.2	*	*6.9	*8.6
Hawaii	7.7	7.0	6.9	5.9	5.8	5.6	*	*9.4	*8.8

[1]Before 1979, data are for infants weighing 2,500 grams or less at birth.

*Data for States with fewer than 5,000 live births for the 3-year period are considered unreliable. Data for States with fewer than 1,000 births are considered highly unreliable and are not shown.

SOURCE: National Center for Health Statistics: Data computed by the Division of Analysis from data compiled by the Division of Vital Statistics.

Table 9. Legal abortion ratios, according to selected patient characteristics: United States, selected years 1973–85

[Data are based on reporting by State health departments and by facilities]

Characteristic	1973	1975	1980	1981	1982	1983	1984	1985
	Abortions per 100 live births							
Total	19.6	27.2	35.9	35.8	35.4	34.9	36.4	35.4
Age								
Under 15 years	74.3	101.5	122.7	126.4	120.0	133.6	145.8	141.2
15–19 years	31.7	46.4	66.4	66.8	66.5	67.3	71.4	71.7
20–24 years	17.9	25.0	37.5	37.9	38.0	38.1	41.2	40.4
25–29 years	12.3	16.6	23.0	23.2	23.5	23.0	23.9	23.2
30–34 years	16.5	22.1	23.3	23.7	23.0	22.0	22.3	21.4
35–39 years	26.7	37.5	40.3	40.3	37.1	35.4	35.2	33.4
40 years and over	40.2	59.9	78.3	77.6	75.0	69.1	66.7	63.8
Race								
White	17.5	22.7	31.3	31.2	30.4	29.5	30.8	29.6
All other	28.9	46.5	54.7	54.4	55.6	56.0	58.2	57.6
Marital status								
Married	6.2	8.3	10.2	9.8	9.7	9.3	9.6	8.7
Unmarried	109.8	141.1	149.9	147.5	142.2	135.2	137.1	129.5
Number of previous live births[1]								
0	23.0	30.2	48.6	48.6	48.2	46.9	49.3	47.7
1	12.1	17.3	21.9	21.9	22.0	22.1	23.0	22.8
2	19.6	29.7	32.8	32.6	32.4	32.5	34.0	33.0
3	25.8	39.8	33.5	33.5	32.2	31.9	32.8	32.1
4 or more	26.4	40.8	27.3	26.6	25.4	24.8	24.9	23.7

[1]For 1973–75, data indicate number of living children.

SOURCES: Centers for Disease Control: *Abortion Surveillance, 1973–75.* Public Health Service, DHHS, Atlanta, Ga., May 1977–Nov. 1980; *Abortion Surveillance, 1980.* Public Health Service, DHHS, Atlanta, Ga., May 1983; Unpublished data.

Table 10. Legal abortions, according to selected characteristics: United States, selected years 1973–85

[Data are based on reporting by State health departments and by facilities]

Characteristic	1973	1975	1980	1981	1982	1983	1984	1985
				Number of legal abortions reported in thousands				
Centers for Disease Control	616	855	1,298	1,301	1,304	1,269	1,334	1,329
Alan Guttmacher Institute	745	1,034	1,554	1,577	1,574	1,575	1,577	1,589
				Percent distribution				
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Period of gestation								
Under 9 weeks	36.1	44.6	51.7	51.2	50.6	49.7	49.7	50.8
9–10 weeks	29.4	28.4	26.2	26.8	26.7	26.8	26.8	26.2
11–12 weeks	17.9	14.9	12.2	12.1	12.4	12.8	12.9	12.3
13–15 weeks	6.9	5.0	5.2	5.2	5.3	5.8	5.9	5.9
16–20 weeks	8.0	6.1	3.9	3.7	3.9	3.9	3.9	3.9
21 weeks and over	1.7	1.0	0.9	1.0	1.1	1.0	0.8	0.8
Type of procedure								
Curettage	88.4	90.9	95.5	96.1	96.4	96.8	96.6	97.8
Intrauterine instillation	10.4	6.2	3.1	2.8	2.5	2.1	2.0	1.5
Hysterotomy or hysterectomy	0.7	0.4	0.1	0.1	0.0	0.0	0.0	0.0
Other	0.6	2.4	1.3	1.0	1.0	1.1	1.4	0.7
Location of facility								
In State of residence	74.8	89.2	92.6	92.5	92.9	93.3	92.0	92.4
Out of State of residence	25.2	10.8	7.4	7.5	7.1	6.7	8.0	7.6
Previous induced abortions								
0	---	81.9	67.6	65.3	63.7	62.4	60.5	60.1
1	---	14.9	23.5	24.3	24.9	25.0	25.7	25.7
2	---	2.5	6.6	7.5	8.2	9.0	9.4	9.8
3 or more	---	0.7	2.3	2.9	3.2	3.7	4.3	4.4

NOTE: For a discussion of the differences in reported legal abortions between the Centers for Disease Control and the Alan Guttmacher Institute, see Appendix I. Percent distributions exclude cases for which selected characteristic was unknown and are based on abortions reported to the Centers for Disease Control.

SOURCES: Centers for Disease Control: *Abortion Surveillance, 1980*. Public Health Service, DHHS, Atlanta, Ga., May 1983; Unpublished data; Sullivan, E., Tietze, C., and Dryfoos, J.: Legal abortions in the United States, 1975–1976. *Fam. Plann. Perspect.* 9(3):116–129, May-June 1977; Henshaw, S., Forrest, J. D., and Blaine, E.: Abortion services in the United States, 1981 and 1982. *Fam. Plann. Perspect.* 16(3), May-June 1984; Henshaw, S., Forrest, J. D., and Van Vost, J.: Abortion services in the United States, 1984 and 1985. *Fam. Plann. Perspect.* 19(2), Mar.–Apr. 1987.

Table 11. Legal abortions, abortion-related deaths and death rates, and relative risk of death, according to period of gestation: United States, 1974–76, 1977–79, 1980–82, and 1983–85

[Data are based primarily on reporting by State health departments and by facilities]

Period of gestation and year	Number of legal abortions reported	Abortion-related deaths[1]		
		Number	Rate per 100,000 abortions	Relative risk of death[2]
Total				
1974–76	2,606,586	66	2.5	. . .
1977–79	3,489,127	44	1.3	. . .
1980–82	3,902,346	[3]27	0.7	. . .
1983–85	3,931,078	[4]27	0.7	. . .
Under 9 weeks				
1974–76	1,171,478	8	*0.7	*1.0
1977–79	1,808,655	10	*0.6	*1.0
1980–82	1,996,573	6	*0.3	*
1983–85	1,968,827	2	*	*
9–10 weeks				
1974–76	738,615	10	*1.4	*2.0
1977–79	942,467	9	*1.0	*1.7
1980–82	1,036,542	5	*0.5	*
1983–85	1,046,140	5	*0.5	*
11–12 weeks				
1974–76	387,208	10	*2.6	*3.7
1977–79	439,754	7	*1.6	*2.7
1980–82	477,875	3	*	*
1983–85	497,902	3	*	*
13 weeks and over				
1974–76	309,295	38	12.3	*17.6
1977–79	298,251	18	6.0	*10.0
1980–82	391,356	11	2.8	*
1983–85	418,209	15	3.6	*

[1] 1983 data are provisional.
[2] Relative risk is the ratio of the death rate in the specified category to the death rate for the gestation period under 9 weeks.
[3] 1982 data include 2 deaths with weeks of gestation unknown.
[4] 1984 data include 2 deaths with weeks of gestation unknown.

*Estimates with relative standard errors greater than 30 percent are considered unreliable. Estimates with relative standard errors greater than 50 percent are considered highly unreliable and are not shown.

SOURCE: Centers for Disease Control: *Abortion Surveillance, 1978.* Public Health Service, DHHS, Atlanta, Ga., Nov. 1980; Unpublished data.

Table 12. Methods of contraception for ever-married women 15–44 years of age, according to race and age: United States, 1973, 1976, and 1982

[Data are based on household interviews of samples of ever-married women in the childbearing ages]

Method of contraception and age	All races			White			Black		
	1973	1976	1982	1973	1976	1982	1973	1976	1982
	Percent of ever-married women								
All methods									
15–44 years	66.4	65.7	65.6	67.8	67.0	66.8	55.8	56.7	58.2
15–24 years	68.9	68.3	66.6	67.1	69.7	68.3	65.2	59.0	52.6
25–34 years	70.4	69.4	67.9	71.6	70.8	68.6	59.2	61.1	65.6
35–44 years	61.5	59.3	62.3	63.6	60.6	63.9	46.8	50.3	51.1
	Percent of ever-married contracepting women								
Female sterilization									
15–44 years	13.6	15.3	26.6	12.5	14.8	25.0	25.4	21.8	39.8
15–24 years	4.3	3.8	*5.0	4.1	3.6	*4.6	6.8	*7.1	*12.0
25–34 years	12.1	15.8	21.7	11.4	15.6	19.7	20.3	19.1	35.6
35–44 years	21.7	22.7	43.2	19.2	21.6	41.9	47.2	35.1	56.6
Male sterilization[1]									
15–44 years	10.4	11.9	13.1	11.2	12.9	14.2	*1.2	*2.0	*2.2
15–24 years	2.1	*1.3	*4.0	2.3	*1.4	*4.3	*0.1	*0.4	*0.4
25–34 years	10.3	10.7	11.1	11.0	11.7	12.3	*2.0	*0.4	*1.7
35–44 years	15.8	20.9	20.1	17.2	22.8	21.5	*1.1	*5.2	*3.8
Birth control pill									
15–44 years	36.6	34.5	22.4	36.1	34.2	22.3	41.8	38.1	25.1
15–24 years	65.3	63.9	56.5	64.4	64.2	56.2	72.4	61.1	58.5
25–34 years	36.2	34.8	24.5	35.8	34.2	23.9	41.6	42.7	30.2
35–44 years	18.3	13.6	*3.4	18.2	13.1	*3.3	17.2	16.9	*5.0
Intrauterine device									
15–44 years	10.2	10.0	7.9	9.8	9.7	7.7	13.8	12.6	10.6
15–24 years	10.8	9.4	*3.6	10.7	9.3	*3.3	12.6	11.0	*8.8
25–34 years	13.2	11.3	10.1	12.7	11.0	9.8	18.8	13.6	14.6
35–44 years	5.6	8.3	7.0	5.4	8.0	7.2	8.4	12.1	*5.0
Diaphragm									
15–44 years	3.4	4.0	7.0	3.6	4.2	7.3	1.8	2.8	4.4
15–24 years	*1.5	3.3	*7.5	*1.6	3.6	*7.8	*0.3	*0.5	*4.0
25–34 years	3.1	4.1	9.1	3.2	4.3	9.7	*2.2	*2.3	3.5
35–44 years	5.0	4.5	*3.9	5.3	4.5	*3.8	*2.5	*4.8	*6.0
Condom									
15–44 years	12.6	9.9	12.1	13.4	10.2	12.6	4.1	8.2	5.0
15–24 years	7.7	7.0	12.1	8.3	7.2	12.3	*1.8	*4.6	*5.6
25–34 years	12.4	9.6	12.4	13.1	9.8	13.0	3.8	7.1	5.0
35–44 years	16.1	12.3	11.7	17.2	12.8	12.2	6.4	*6.0	*4.7

[1] Refers only to currently married couples.

*Relative standard error greater than 30 percent.

SOURCE: Division of Vital Statistics, National Center for Health Statistics: Data from the National Survey of Family Growth.

Table 13. Life expectancy at birth and at 65 years of age, according to race and sex: United States, selected years 1900–1987

[Data are based on the National Vital Statistics System]

Specified age and year	All races			White			Black		
	Both sexes	Male	Female	Both sexes	Male	Female	Both sexes	Male	Female
	Remaining life expectancy in years								
At birth									
1900[1,2]	47.3	46.3	48.3	47.6	46.6	48.7	[3]33.0	[3]32.5	[3]33.5
1950[2]	68.2	65.6	71.1	69.1	66.5	72.2	60.7	58.9	62.7
1960[2]	69.7	66.6	73.1	70.6	67.4	74.1	63.2	60.7	65.9
1970	70.9	67.1	74.8	71.7	68.0	75.6	64.1	60.0	68.3
1975	72.6	68.8	76.6	73.4	69.5	77.3	66.8	62.4	71.3
1980	73.7	70.0	77.4	74.4	70.7	78.1	68.1	63.8	72.5
1981	74.2	70.4	77.8	74.8	71.1	78.4	68.9	64.5	73.2
1982	74.5	70.9	78.1	75.1	71.5	78.7	69.4	65.1	73.7
1983	74.6	71.0	78.1	75.2	71.7	78.7	69.6	65.4	73.6
1984	74.7	71.2	78.2	75.3	71.8	78.7	69.7	65.6	73.7
1985	74.7	71.2	78.2	75.3	71.9	78.7	69.5	65.3	73.5
1986	74.8	71.3	78.3	75.4	72.0	78.8	69.4	65.2	73.5
Provisional data:									
1985[2]	74.7	71.2	78.2	75.3	71.8	78.7	69.5	65.3	73.7
1986[2]	74.9	71.3	78.3	75.4	72.0	78.9	69.6	65.5	73.6
1987[2]	74.9	71.5	78.3	75.5	72.1	78.8	69.7	65.4	73.8
At 65 years									
1900–1902[1,2]	11.9	11.5	12.2	- - -	11.5	12.2	- - -	10.4	11.4
1950[2]	13.9	12.8	15.0	- - -	12.8	15.1	13.9	12.9	14.9
1960[2]	14.3	12.8	15.8	14.4	12.9	15.9	13.9	12.7	15.1
1970	15.2	13.1	17.0	15.2	13.1	17.1	14.2	12.5	15.7
1975	16.1	13.8	18.1	16.1	13.8	18.2	15.0	13.1	16.7
1980	16.4	14.1	18.3	16.5	14.2	18.4	15.1	13.0	16.8
1981	16.7	14.3	18.6	16.7	14.4	18.7	15.5	13.4	17.3
1982	16.8	14.5	18.7	16.9	14.5	18.8	15.7	13.5	17.5
1983	16.7	14.5	18.6	16.8	14.5	18.7	15.5	13.4	17.3
1984	16.8	14.6	18.6	16.9	14.6	18.7	15.5	13.5	17.2
1985	16.7	14.6	18.6	16.8	14.6	18.7	15.3	13.3	17.0
1986	16.8	14.7	18.6	16.9	14.8	18.7	15.4	13.4	17.0
Provisional data:									
1985[2]	16.8	14.6	18.6	16.8	14.6	18.7	15.5	13.3	17.2
1986[2]	16.9	14.8	18.6	17.0	14.8	18.8	15.5	13.6	16.9
1987[2]	16.9	14.8	18.6	17.0	14.9	18.7	15.6	13.6	17.2

[1]Death registration area only. The death registration area increased from 10 States and the District of Columbia in 1900 to the coterminous United States in 1933.
[2]Includes deaths of nonresidents of the United States.
[3]Figure is for the all other population.

SOURCES: National Center for Health Statistics: *Vital Statistics Rates in the United States, 1940–1960*, by R. D. Grove and A. M. Hetzel. DHEW Pub. No. (PHS) 1677. Public Health Service. Washington. U.S. Government Printing Office, 1968; *Vital Statistics of the United States, 1970*, Vol. II, Mortality, Part A. DHEW Pub. No. (HRA) 75-1101. Health Resources Administration. Washington. U.S. Government Printing Office, 1974; Annual summary of births, marriages, divorces, and deaths, United States, 1985. *Monthly Vital Statistics Report*. Vol. 34, No. 13. DHHS Pub. No. (PHS) 86-1120. Sept. 19, 1986; Annual summary of births, marriages, divorces, and deaths, United States, 1986. *Monthly Vital Statistics Report*. Vol. 35, No. 13. DHHS Pub. No. (PHS) 87-1120. Aug. 24, 1987; Annual summary of births, marriages, divorces, and deaths, United States, 1987. *Monthly Vital Statistics Report*. Vol. 36, No. 13. DHHS Pub. No. (PHS) 88-1120. July 29, 1988. Public Health Service. Hyattsville, Md.; Unpublished data from the Division of Vital Statistics; Data computed by the Office of Research and Methodology from data compiled by the Division of Vital Statistics.

Table 14. Infant mortality rates, fetal death rates, and perinatal mortality rates, according to race: United States, selected years 1950–87

[Data are based on the National Vital Statistics System]

Race and year	Infant mortality rate[1]				Fetal death rate[2]	Late fetal death rate[3]	Perinatal mortality rate[4]
		Neonatal					
	Total	Under 28 days	Under 7 days	Postneonatal			
	Deaths per 1,000 live births						
All races							
1950[5]	29.2	20.5	17.8	8.7	18.4	14.9	32.5
1960[5]	26.0	18.7	16.7	7.3	15.8	12.1	28.6
1970	20.0	15.1	13.6	4.9	14.0	9.5	23.0
1975	16.1	11.6	10.0	4.5	10.6	7.8	17.7
1980	12.6	8.5	7.1	4.1	9.1	6.2	13.2
1981	11.9	8.0	6.7	3.9	8.9	5.9	12.6
1982	11.5	7.7	6.4	3.8	8.8	5.9	12.3
1983	11.2	7.3	6.1	3.9	8.4	5.4	11.5
1984	10.8	7.0	5.9	3.8	8.1	5.2	11.0
1985	10.6	7.0	5.8	3.7	7.8	4.9	10.7
1986	10.4	6.7	5.6	3.6	7.7	4.7	10.3
Provisional data:							
1985[6]	10.6	6.9	- - -	3.6	- - -	- - -	- - -
1986[6]	10.4	6.7	- - -	3.7	- - -	- - -	- - -
1987[6]	10.0	6.5	- - -	3.4	- - -	- - -	- - -
White							
1950[5]	26.8	19.4	17.1	7.4	16.6	13.3	30.1
1960[5]	22.9	17.2	15.6	5.7	13.9	10.8	26.2
1970	17.8	13.8	12.5	4.0	12.3	8.6	21.1
1975	14.2	10.4	9.0	3.8	9.4	7.1	16.0
1980	11.0	7.5	6.2	3.5	8.1	5.7	11.9
1981	10.5	7.1	5.9	3.4	8.0	5.5	11.3
1982	10.1	6.8	5.6	3.3	7.9	5.4	11.0
1983	9.7	6.4	5.4	3.3	7.4	5.0	10.3
1984	9.4	6.2	5.1	3.3	7.3	4.8	9.9
1985	9.3	6.1	5.0	3.2	7.0	4.5	9.6
1986	8.9	5.8	4.8	3.1	6.7	4.3	9.1
Black							
1950[5]	43.9	27.8	23.0	16.1	32.1	- - -	- - -
1960[5]	44.3	27.8	23.7	16.5	- - -	- - -	- - -
1970	32.6	22.8	20.3	9.9	23.2	- - -	- - -
1975	26.2	18.3	15.7	7.9	16.8	11.4	26.9
1980	21.4	14.1	11.9	7.3	14.4	8.9	20.7
1981	20.0	13.4	11.4	6.6	13.8	8.2	19.4
1982	19.6	13.1	11.1	6.6	13.8	8.1	19.1
1983	19.2	12.4	10.6	6.8	13.5	7.7	18.2
1984	18.4	11.8	10.2	6.5	12.7	7.1	17.4
1985	18.2	12.1	10.3	6.1	12.6	7.1	17.4
1986	18.0	11.7	10.1	6.3	12.5	7.0	17.0

[1] Infant mortality rate is number of deaths of infants under 1 year per 1,000 live births. Neonatal deaths occur within 28 days of birth; postneonatal deaths occur 28–365 days after birth. Deaths within 7 days are early neonatal deaths.
[2] Number of deaths of fetuses of 20 weeks or more gestation per 1,000 live births plus fetal deaths.
[3] Number of fetal deaths of 28 weeks or more gestation per 1,000 live births plus late fetal deaths.
[4] Number of late fetal deaths plus infant deaths within 7 days of birth per 1,000 live births plus late fetal deaths.
[5] Includes births and deaths of nonresidents of the United States.

SOURCES: National Center for Health Statistics: *Vital Statistics of the United States*, Vol. II, Mortality, Part A, 1950–83. Public Health Service. Washington. U.S. Government Printing Office. 1984–88, to be published; Annual summary of births, marriages, divorces, and deaths, United States, 1985. *Monthly Vital Statistics Report.* Vol. 34, No. 13. DHHS Pub. No. (PHS) 86-1120. Sept. 19, 1986; Annual summary of births, marriages, divorces, and deaths, United States, 1986. *Monthly Vital Statistics Report.* Vol. 35, No. 13. DHHS Pub. No. (PHS) 87-1120. Aug. 24, 1987; Annual summary of births, marriages, divorces, and deaths, United States, 1987. *Monthly Vital Statistics Report.* Vol. 36, No. 13. DHHS Pub. No. (PHS) 88-1120. July 29, 1988. Public Health Service. Hyattsville, Md.; Data computed by the Division of Analysis from data compiled by the Division of Vital Statistics.

Table 15. Infant mortality rates, according to race, geographic division, and State: United States, average annual 1974-76, 1979-81, and 1984-86

[Data are based on the National Vital Statistics System]

Geographic division and State	All races			White			Black		
	1974-76	1979-81	1984-86	1974-76	1979-81	1984-86	1974-76	1979-81	1984-86
	Infant deaths per 1,000 live births								
United States	16.0	12.5	10.6	14.1	11.0	9.2	26.2	21.0	18.2
New England	13.8	10.7	9.2	13.2	10.2	8.5	24.6	18.7	18.3
Maine	13.4	9.9	8.8	13.5	10.1	8.9	*	*	*
New Hampshire	12.9	10.0	9.5	13.0	10.1	9.5	*	*	*
Vermont	13.4	9.0	9.1	13.4	9.0	9.0	*	*	*
Massachusetts	13.2	10.4	8.8	12.8	10.0	8.2	20.5	16.4	17.9
Rhode Island	14.9	12.3	9.1	14.2	11.6	8.8	*29.0	*23.1	*14.5
Connecticut	15.1	11.8	9.8	13.4	10.5	8.5	28.7	21.0	19.5
Middle Atlantic	16.0	12.7	10.7	13.9	11.0	9.1	26.3	20.8	17.7
New York	16.1	12.8	10.8	13.8	11.1	9.4	25.7	20.2	16.3
New Jersey	15.3	12.1	10.4	13.0	9.9	8.6	25.5	20.9	18.6
Pennsylvania	16.3	12.8	10.5	14.6	11.5	9.0	28.5	22.2	20.4
East North Central	16.2	13.0	11.1	14.2	11.1	9.3	28.0	23.8	20.7
Ohio	15.6	12.6	10.5	14.2	11.2	9.3	25.6	21.9	17.4
Indiana	15.3	12.2	11.1	14.2	11.1	10.1	25.1	21.8	20.0
Illinois	18.2	14.6	12.0	14.8	11.7	9.4	31.2	25.9	21.9
Michigan	16.3	13.1	11.5	14.1	11.0	9.2	27.3	24.0	22.9
Wisconsin	13.3	10.5	9.4	12.9	10.0	8.7	21.1	18.3	17.8
West North Central	15.0	11.4	9.6	14.0	10.6	9.0	26.8	21.1	16.9
Minnesota	14.0	10.3	9.0	13.7	10.0	8.9	*23.5	*23.1	14.9
Iowa	14.0	10.8	8.9	13.7	10.5	8.8	*30.3	*22.8	*13.7
Missouri	16.2	12.9	10.4	14.3	11.6	9.1	27.2	20.9	17.9
North Dakota	15.2	11.7	8.4	14.7	11.2	8.1	*	*	*
South Dakota	17.6	11.2	11.0	15.6	9.6	9.4	*	*	*
Nebraska	14.5	11.0	9.8	13.8	10.4	9.2	*31.4	*22.5	*17.8
Kansas	14.6	11.0	9.4	14.0	10.2	8.9	24.0	20.3	15.9
South Atlantic	17.7	14.4	12.0	14.5	11.5	9.4	26.0	21.6	18.8
Delaware	14.8	14.8	12.4	12.9	10.9	9.9	21.5	27.4	20.8
Maryland	16.6	13.7	11.8	14.2	11.2	9.5	23.7	20.0	17.7
District of Columbia	27.0	24.1	21.0	*17.2	*13.7	10.4	28.8	26.3	24.0
Virginia	16.9	13.5	11.6	14.2	11.7	9.4	26.4	20.0	16.9
West Virginia	18.0	12.9	10.7	17.7	12.5	10.3	*26.5	*23.2	*20.9
North Carolina	18.5	14.3	11.9	15.4	11.3	9.5	26.4	21.1	18.0
South Carolina	20.0	16.3	14.0	15.4	11.9	10.3	27.6	22.9	20.2
Georgia	17.4	14.4	12.7	13.8	10.9	9.6	24.4	20.8	18.6
Florida	16.7	14.2	11.0	13.4	11.5	8.8	26.8	22.4	18.1
East South Central	18.4	13.9	12.1	15.0	11.3	9.7	27.7	21.0	18.6
Kentucky	15.7	12.2	10.9	15.1	11.5	10.3	22.0	19.7	17.2
Tennessee	16.5	13.2	11.4	14.3	11.2	9.1	25.0	20.4	19.2
Alabama	20.0	14.2	12.9	15.5	11.1	9.9	28.4	19.9	18.8
Mississippi	22.3	16.7	13.5	15.2	11.1	9.4	30.2	22.7	18.2
West South Central	17.1	12.7	10.4	15.1	11.1	9.3	25.6	19.8	16.3
Arkansas	16.9	12.7	11.0	14.6	10.5	9.7	24.1	19.3	15.4
Louisiana	18.3	14.5	11.9	14.1	10.9	8.7	25.0	20.6	17.2
Oklahoma	16.8	12.3	10.7	16.1	11.8	10.7	27.0	19.6	16.9
Texas	16.8	12.2	9.9	15.2	11.1	9.1	26.3	19.3	15.7
Mountain	14.7	11.1	9.6	14.2	10.7	9.4	22.7	19.0	14.9
Montana	16.1	11.3	9.6	16.1	10.8	9.1	*	*	*
Idaho	13.8	10.0	10.5	13.8	10.0	10.5	*	*	*
Wyoming	16.6	11.1	11.4	16.7	11.1	11.4	*	*	*
Colorado	14.3	10.2	9.4	14.1	10.1	9.1	20.6	15.4	16.7
New Mexico	16.9	11.7	9.9	16.3	11.3	9.7	*29.1	*18.5	*13.3
Arizona	15.0	12.6	9.5	13.7	11.7	9.1	*21.3	21.3	14.7
Utah	12.3	10.3	9.1	12.0	10.3	9.1	*	*	*
Nevada	17.2	11.5	9.4	16.2	10.5	9.3	*27.8	*22.3	*14.2
Pacific	13.5	10.9	9.5	13.1	10.6	9.2	21.1	16.9	16.0
Washington	15.1	11.2	10.2	14.9	11.1	10.2	21.4	14.3	15.7
Oregon	14.2	11.3	9.7	14.1	11.3	9.7	*21.9	*15.8	*16.2
California	13.2	10.8	9.3	12.6	10.4	8.9	21.1	17.1	16.1
Alaska	16.2	13.6	10.9	12.8	11.2	9.7	*	*20.3	*15.6
Hawaii	13.0	10.0	9.4	13.5	10.4	8.0	*13.0	*11.4	*16.6

*Data for States with fewer than 5,000 live births for the 3-year period are considered unreliable. Data for States with fewer than 1,000 births are considered highly unreliable and are not shown.

SOURCE: National Center for Health Statistics: Data computed by the Division of Analysis from data compiled by the Division of Vital Statistics.

Table 18. Neonatal mortality rates, according to race, geographic division, and State: United States, average annual 1974-76, 1979-81, and 1984-86

[Data are based on the National Vital Statistics System]

Geographic division and State	All races			White			Black		
	1974-76	1979-81	1984-86	1974-76	1979-81	1984-86	1974-76	1979-81	1984-86
	Neonatal deaths per 1,000 live births								
United States	11.6	8.5	6.9	10.4	7.5	6.0	18.3	13.9	11.9
New England	10.5	7.8	6.4	10.1	7.4	6.0	18.6	13.9	13.2
Maine	9.7	6.1	5.7	9.7	6.2	5.8	*	*	*
New Hampshire	9.9	7.2	6.4	9.9	7.2	6.4	*	*	*
Vermont	10.2	5.5	6.1	10.3	5.5	6.1	*	*	*
Massachusetts	10.0	7.6	6.2	9.8	7.3	5.7	14.2	11.7	12.2
Rhode Island	11.1	9.3	6.5	10.6	9.1	6.2	*22.2	*13.7	*10.5
Connecticut	12.0	9.0	7.3	10.6	7.9	6.3	22.9	16.7	14.9
Middle Atlantic	12.0	9.0	7.3	10.6	8.0	6.4	19.0	14.0	11.4
New York	11.9	9.0	7.4	10.3	7.9	6.7	18.8	13.7	10.5
New Jersey	11.4	8.4	7.1	10.0	7.2	6.2	17.6	13.3	11.5
Pennsylvania	12.6	9.3	7.2	11.4	8.5	6.2	21.0	15.2	13.8
East North Central	11.8	8.9	7.4	10.5	7.7	6.2	19.4	15.7	13.8
Ohio	11.5	8.7	6.8	10.5	7.8	6.1	18.4	14.7	11.1
Indiana	11.0	8.4	7.4	10.3	7.8	6.7	18.0	13.9	13.7
Illinois	13.3	10.1	8.1	11.2	8.3	6.5	21.3	16.7	14.1
Michigan	11.7	9.0	7.9	10.3	7.5	6.2	18.9	16.8	16.5
Wisconsin	9.6	6.9	5.9	9.5	6.7	5.4	13.8	10.8	11.7
West North Central	11.1	7.6	6.0	10.5	7.1	5.6	19.0	14.0	10.5
Minnesota	10.2	6.7	5.5	10.2	6.5	5.5	*15.3	*15.3	9.0
Iowa	10.8	7.2	5.8	10.6	7.1	5.7	*24.4	*14.2	*9.1
Missouri	11.8	8.8	6.6	10.6	8.0	5.7	19.2	13.8	11.1
North Dakota	11.7	8.0	4.7	11.7	7.7	4.7	*	*	*
South Dakota	12.0	6.4	6.0	11.5	5.9	5.5	*	*	*
Nebraska	10.6	7.2	6.3	10.2	6.8	6.0	*20.3	*15.2	*11.4
Kansas	10.9	7.6	5.9	10.5	7.1	5.6	17.9	14.1	10.1
South Atlantic	12.8	9.9	8.1	10.8	8.0	6.4	18.1	14.6	12.7
Delaware	11.0	11.2	9.0	9.8	7.9	7.4	15.4	21.9	14.5
Maryland	12.6	9.9	8.2	10.9	8.1	6.4	18.1	14.4	12.7
District of Columbia	21.5	18.4	16.0	*14.8	*11.6	7.7	22.8	19.8	18.4
Virginia	12.6	9.8	8.1	10.6	8.4	6.5	19.6	14.7	13.2
West Virginia	13.5	8.7	7.0	13.2	8.4	6.7	*20.9	*15.7	*14.9
North Carolina	13.4	9.7	7.8	11.6	7.8	6.4	17.8	14.1	11.8
South Carolina	14.0	11.0	9.5	11.4	8.2	7.1	18.2	15.3	13.5
Georgia	12.1	9.4	8.6	10.0	7.4	6.5	16.1	13.0	12.6
Florida	11.9	9.5	7.2	9.9	7.9	5.9	18.1	14.3	11.5
East South Central	13.1	9.2	7.9	11.0	7.5	6.4	18.8	13.6	12.0
Kentucky	11.3	8.0	7.1	11.0	7.5	6.7	15.0	13.0	11.4
Tennessee	12.1	9.0	7.5	10.5	7.6	5.8	18.1	14.2	13.2
Alabama	14.2	9.2	8.7	11.6	7.5	6.9	19.2	12.5	12.2
Mississippi	15.4	10.9	8.4	11.3	7.6	6.2	19.9	14.4	11.0
West South Central	12.3	8.3	6.6	11.1	7.4	5.9	18.0	12.8	10.1
Arkansas	12.0	7.5	6.5	10.9	6.6	5.9	15.5	10.5	8.9
Louisiana	13.6	9.8	7.8	10.7	7.5	5.9	18.3	13.7	11.0
Oklahoma	11.7	7.8	6.7	11.5	7.6	6.7	18.5	11.7	10.5
Texas	12.1	8.1	6.2	11.1	7.4	5.8	18.4	12.6	9.7
Mountain	10.1	7.0	5.6	10.0	6.9	5.6	16.0	12.2	8.8
Montana	11.6	7.0	5.0	12.0	7.1	4.9	*	*	*
Idaho	9.6	6.1	6.0	9.6	6.1	6.0	*	*	*
Wyoming	11.6	7.6	6.4	11.9	7.7	6.5	*	*	*
Colorado	9.9	6.5	5.5	9.8	6.4	5.3	14.3	10.3	10.0
New Mexico	10.9	7.3	5.9	11.2	7.5	6.0	*20.4	*11.2	*6.4
Arizona	10.0	8.2	5.7	9.7	8.1	5.6	*16.1	14.3	9.1
Utah	8.7	6.4	5.4	8.7	6.4	5.4	*	*	*
Nevada	11.9	6.6	5.2	11.2	6.1	5.2	*18.4	*13.2	*8.0
Pacific	9.3	7.0	5.8	9.0	6.8	5.6	14.2	10.8	9.9
Washington	10.3	6.8	5.7	10.2	6.9	5.6	14.8	8.0	9.7
Oregon	9.3	6.9	4.9	9.3	6.8	4.9	*13.2	*11.0	*9.1
California	9.1	7.0	5.9	8.7	6.8	5.7	14.1	11.0	9.9
Alaska	10.1	8.0	5.7	8.1	7.0	5.2	*	*15.0	*7.5
Hawaii	9.6	7.1	6.2	9.7	7.9	5.4	*8.0	*6.8	*9.3

*Data for States with fewer than 5,000 live births for the 3-year period are considered unreliable. Data for States with fewer than 1,000 births are considered highly unreliable and are not shown.

SOURCE: National Center for Health Statistics: Data computed by the Division of Analysis from data compiled by the Division of Vital Statistics.

Table 17. Postneonatal mortality rates, according to race, geographic division, and State: United States, average annual 1974-76, 1979-81, and 1984-86

[Data are based on the National Vital Statistics System]

Geographic division and State	All races			White			Black		
	1974-76	1979-81	1984-86	1974-76	1979-81	1984-86	1974-76	1979-81	1984-86
	Postneonatal deaths per 1,000 live births								
United States	4.4	4.1	3.7	3.7	3.5	3.2	7.9	7.1	6.3
New England	3.3	2.9	2.7	3.1	2.8	2.5	6.0	4.8	5.1
Maine	3.8	3.8	3.0	3.8	3.8	3.1	*	*	*
New Hampshire	3.1	2.9	3.1	3.1	2.9	3.1	*	*	*
Vermont	3.1	3.5	2.9	3.1	3.5	2.9	*	*	*
Massachusetts	3.2	2.8	2.7	3.0	2.7	2.4	6.3	4.7	5.7
Rhode Island	3.7	3.0	2.7	3.6	2.6	2.6	*	*9.4	*4.0
Connecticut	3.1	2.8	2.4	2.8	2.6	2.2	5.7	4.3	4.6
Middle Atlantic	4.0	3.7	3.4	3.3	3.0	2.7	7.3	6.8	6.3
New York	4.2	3.8	3.4	3.5	3.2	2.8	6.9	6.4	5.9
New Jersey	3.9	3.7	3.3	3.0	2.7	2.5	7.9	7.6	7.0
Pennsylvania	3.7	3.5	3.3	3.2	3.0	2.8	7.6	7.0	6.6
East North Central	4.4	4.1	3.7	3.7	3.4	3.1	8.5	8.0	6.9
Ohio	4.1	3.9	3.7	3.7	3.4	3.2	7.2	7.2	6.3
Indiana	4.2	3.8	3.7	3.9	3.3	3.4	7.1	7.9	6.4
Illinois	4.9	4.6	3.9	3.6	3.3	2.9	9.9	9.2	7.8
Michigan	4.6	4.1	3.6	3.8	3.5	3.0	8.4	7.1	6.4
Wisconsin	3.7	3.6	3.6	3.4	3.3	3.3	7.3	7.5	6.1
West North Central	3.9	3.8	3.6	3.5	3.5	3.3	7.8	7.1	6.4
Minnesota	3.8	3.7	3.5	3.5	3.5	3.4	*8.3	*7.9	*5.9
Iowa	3.2	3.6	3.1	3.1	3.5	3.1	*5.9	*8.6	*4.7
Missouri	4.3	4.1	3.9	3.7	3.6	3.4	8.0	7.1	6.9
North Dakota	3.5	3.8	3.7	3.1	3.5	3.5	*	*	*
South Dakota	5.6	4.9	5.1	4.1	3.7	3.8	*	*	*
Nebraska	3.9	3.8	3.5	3.6	3.6	3.2	*11.1	*7.3	*6.4
Kansas	3.7	3.4	3.6	3.5	3.1	3.4	*6.0	6.2	5.9
South Atlantic	4.9	4.5	3.9	3.7	3.5	3.0	7.9	7.1	6.1
Delaware	3.7	3.6	3.4	3.1	3.0	2.5	*6.1	*5.5	*6.3
Maryland	4.0	3.8	3.6	3.4	3.1	3.0	5.7	5.7	5.1
District of Columbia	5.5	5.7	4.9	*2.4	*2.0	*2.7	6.1	6.5	5.6
Virginia	4.3	3.7	3.5	3.6	3.3	2.9	6.8	5.3	5.7
West Virginia	4.6	4.2	3.6	4.5	4.1	3.5	*5.7	*7.4	*6.0
North Carolina	5.2	4.5	4.0	3.7	3.5	3.2	8.5	7.0	6.2
South Carolina	6.0	5.3	4.5	4.0	3.7	3.2	9.3	7.6	6.7
Georgia	5.4	5.0	4.1	3.8	3.5	3.1	8.3	7.7	6.0
Florida	4.8	4.7	3.8	3.5	3.6	3.0	8.6	8.1	6.7
East South Central	5.3	4.7	4.2	3.9	3.7	3.3	8.9	7.4	6.6
Kentucky	4.4	4.2	3.8	4.2	4.0	3.6	7.0	6.7	5.7
Tennessee	4.4	4.2	3.9	3.8	3.6	3.3	6.9	6.3	6.0
Alabama	5.7	5.0	4.2	3.9	3.6	3.0	9.2	7.4	6.6
Mississippi	6.9	5.8	5.1	3.9	3.5	3.2	10.3	8.2	7.2
West South Central	4.7	4.3	3.8	4.0	3.7	3.4	7.6	7.0	6.2
Arkansas	5.0	5.1	4.4	3.7	3.9	3.8	8.6	8.8	6.6
Louisiana	4.7	4.7	4.1	3.4	3.4	2.8	6.8	6.8	6.2
Oklahoma	5.0	4.6	4.1	4.6	4.2	4.0	8.5	7.9	6.4
Texas	4.7	4.1	3.7	4.1	3.7	3.3	7.9	6.6	6.0
Mountain	4.7	4.1	4.0	4.2	3.8	3.8	6.6	6.9	6.1
Montana	4.5	4.2	4.6	4.1	3.7	4.3	*	*	*
Idaho	4.3	3.9	4.5	4.2	4.0	4.5	*	*	*
Wyoming	5.0	3.6	4.9	4.8	3.4	4.9	*	*	*
Colorado	4.4	3.7	3.9	4.3	3.7	3.8	*6.3	*5.1	*6.7
New Mexico	6.0	4.4	4.0	5.1	3.8	3.7	*	*7.3	*6.9
Arizona	5.0	4.3	3.9	4.0	3.6	3.5	*5.1	*6.9	*5.6
Utah	3.6	3.9	3.8	3.3	3.9	3.8	*	*	*
Nevada	5.3	4.9	4.1	4.9	4.5	4.1	*9.4	*9.1	*6.3
Pacific	4.3	3.9	3.7	4.1	3.8	3.6	6.9	6.1	6.2
Washington	4.9	4.4	4.6	4.7	4.2	4.6	*6.7	*6.9	*6.0
Oregon	4.9	4.4	4.8	4.8	4.4	4.8	*8.7	*4.8	*7.0
California	4.1	3.8	3.4	3.9	3.7	3.3	6.9	6.1	6.1
Alaska	6.1	5.5	5.3	4.8	4.3	4.4	*	*	*
Hawaii	3.4	3.0	3.1	3.9	2.5	2.5	*	*	*7.3

*Data for States with fewer than 10,000 live births for the 3-year period are considered unreliable. Data for States with fewer than 2,000 births are considered highly unreliable and are not shown.

SOURCE: National Center for Health Statistics: Data computed by the Division of Analysis from data compiled by the Division of Vital Statistics.

Table 18. Fetal death rates, according to race, geographic division, and State: United States, average annual 1974-76, 1979-81, and 1984-86

[Data are based on the National Vital Statistics System]

Geographic division and State	All races			White			Black		
	1974-76	1979-81	1984-86	1974-76	1979-81	1984-86	1974-76	1979-81	1984-86
	Fetal deaths[1] per 1,000 live births plus fetal deaths								
United States	10.8	9.1	7.9	9.8	8.1	7.0	16.8	14.3	12.6
New England	8.9	7.2	6.7	8.7	7.0	6.4	12.9	10.1	11.3
Maine	6.4	7.1	6.4	6.5	7.1	6.4	*	*	*
New Hampshire	7.8	6.3	5.7	7.7	6.3	5.8	*	*	*
Vermont	8.0	6.6	6.8	8.0	6.5	6.8	*	*	*
Massachusetts	9.1	6.5	6.7	9.0	6.3	6.3	11.9	9.1	12.0
Rhode Island	12.0	10.7	7.6	11.9	10.6	7.5	*16.8	*13.5	*10.7
Connecticut	9.1	8.0	6.9	8.7	7.7	6.3	13.3	10.7	11.1
Middle Atlantic	11.4	10.6	9.1	10.5	9.6	8.2	15.9	15.2	13.4
New York	11.5	11.5	9.6	10.6	10.6	8.6	15.2	15.4	13.6
New Jersey	10.2	8.5	8.0	9.4	7.3	6.9	14.1	13.1	12.6
Pennsylvania	12.0	10.4	9.0	11.0	9.5	8.3	19.3	17.0	13.9
East North Central	10.1	8.4	7.1	9.1	7.5	6.3	15.8	13.0	11.0
Ohio	9.9	8.5	7.4	9.1	7.9	6.7	14.8	12.7	11.2
Indiana	10.4	8.6	7.4	9.5	8.0	6.9	18.0	13.7	11.6
Illinois	11.0	9.3	7.9	9.4	7.9	6.7	16.9	14.3	12.2
Michigan	9.8	7.4	5.8	8.9	6.7	5.3	14.3	11.1	8.1
Wisconsin	8.4	7.2	6.5	8.0	7.0	5.9	14.2	11.1	13.5
West North Central	9.6	8.0	6.7	9.2	7.5	6.3	15.9	13.3	10.6
Minnesota	8.7	6.8	6.5	8.6	6.7	6.4	*13.9	*11.2	9.6
Iowa	9.1	7.3	6.6	9.0	7.3	6.5	*14.4	*9.4	*9.6
Missouri	10.4	9.0	6.7	9.5	8.1	6.1	15.9	14.3	10.5
North Dakota	9.9	8.5	6.3	9.6	8.4	6.1	*	*	*
South Dakota	9.8	8.0	6.8	9.4	7.0	6.4	*	*	*
Nebraska	9.1	8.4	7.2	8.8	8.2	6.9	*15.1	*12.4	*12.0
Kansas	10.4	8.1	6.7	9.9	7.6	6.3	18.3	12.5	11.4
South Atlantic	12.7	11.3	9.6	10.6	9.4	7.9	18.2	16.0	14.2
Delaware	10.6	8.9	7.6	9.5	7.5	6.6	14.4	13.6	10.9
Maryland	10.1	8.9	8.4	8.7	7.3	6.8	14.2	13.0	12.5
District of Columbia	15.7	14.1	13.1	*10.6	*10.8	7.6	16.5	14.9	14.7
Virginia	14.2	13.0	10.5	11.9	11.3	8.9	22.3	18.5	16.3
West Virginia	11.2	9.5	8.1	10.9	9.3	8.1	*20.1	*14.3	*10.2
North Carolina	12.8	10.4	8.6	10.4	8.4	7.3	18.3	15.0	12.0
South Carolina	14.2	12.4	10.9	10.6	9.1	8.1	19.9	17.2	15.3
Georgia	14.4	14.5	11.5	12.0	11.9	9.4	18.9	18.9	15.5
Florida	11.4	9.8	8.8	9.7	8.4	7.1	16.5	13.9	13.9
East South Central	13.4	10.7	9.2	10.8	8.7	7.5	20.4	16.0	13.9
Kentucky	10.9	9.5	8.1	10.3	9.0	7.5	18.2	14.4	13.6
Tennessee	12.1	9.4	7.3	10.7	8.2	6.6	17.4	13.5	9.7
Alabama	13.7	11.2	10.6	10.5	8.8	8.2	19.8	15.5	15.0
Mississippi	17.9	13.7	11.8	12.7	9.1	7.9	23.5	18.5	16.1
West South Central	10.8	8.6	7.7	9.7	7.7	7.0	15.4	12.7	11.3
Arkansas	11.7	9.6	7.8	9.7	7.8	6.7	17.7	15.2	11.1
Louisiana	11.3	10.0	8.8	8.6	7.6	6.7	15.6	14.0	12.4
Oklahoma	9.8	9.1	7.9	9.1	8.4	7.6	15.1	14.9	10.9
Texas	10.7	8.0	7.4	10.0	7.6	6.9	14.7	10.7	10.7
Mountain	9.5	8.0	7.0	9.2	7.9	6.9	15.8	12.4	10.5
Montana	9.5	7.1	7.4	9.2	6.9	7.1	*	*	*
Idaho	8.6	7.4	7.2	8.2	7.4	7.0	*	*	*
Wyoming	10.8	7.8	6.9	10.7	8.0	6.9	*	*	*
Colorado	11.5	9.7	8.6	11.4	9.5	8.4	16.9	14.5	12.1
New Mexico	9.1	7.5	5.7	8.7	7.3	5.8	*16.4	*12.0	*5.4
Arizona	8.9	7.6	6.4	8.3	7.3	6.2	*14.3	11.8	8.8
Utah	8.4	7.5	6.6	8.2	7.4	6.6	*	*	*
Nevada	8.5	8.1	7.0	7.9	7.6	6.5	*13.4	*11.8	*13.2
Pacific	9.3	7.9	6.7	8.7	7.5	6.4	14.4	12.2	10.7
Washington	8.6	7.4	6.2	8.4	7.2	6.0	15.1	12.6	8.5
Oregon	8.7	7.1	6.5	8.5	7.0	6.5	*14.8	*10.9	*8.0
California	9.2	7.9	6.7	8.7	7.5	6.4	14.3	12.2	10.9
Alaska	9.2	7.8	6.7	9.7	7.3	6.3	*	*11.9	*8.6
Hawaii	13.8	11.1	8.8	15.8	14.2	8.1	*20.6	*12.9	*11.8

[1]Deaths of fetuses of 20 weeks or more gestation.

*Data for States with fewer than 5,000 live births for the 3-year period are considered unreliable. Data for States with fewer than 1,000 births are considered highly unreliable and are not shown.

SOURCE: National Center for Health Statistics: Data compiled by the Division of Analysis from data compiled by the Division of Vital Statistics.

Table 19. Infant mortality rates, perinatal mortality ratios, and average annual percent change: Selected countries, 1980 and 1985

[Data are based on National Vital Statistics Systems]

Country	Infant mortality rate			Perinatal mortality ratio		
	1980	1985[1]	Average annual percent change	1980	1985[2]	Average annual percent change
	Infant deaths per 1,000 live births			Perinatal deaths per 1,000 live births		
Japan	7.5	5.5	-6.0	11.7	8.0	-7.3
Iceland	7.7	6.1	-4.6	8.8	6.1	-6.8
Finland	7.6	6.3	-3.7	8.4	7.3	-2.8
Sweden	6.9	6.8	-0.3	8.7	7.3	-3.4
Switzerland	8.5	6.9	-4.1	9.5	8.3	-2.7
Hong Kong	11.2	7.5	-7.7	11.6	7.7	-7.9
Canada	11.9	7.9	-7.9	10.9	8.7	-4.4
Denmark	8.4	7.9	-1.2	9.0	8.1	-2.1
Netherlands	8.6	8.0	-1.4	11.1	9.9	-2.3
France	10.0	8.3	-3.7	13.0	10.8	-3.6
Norway	8.1	8.5	1.0	11.1	8.5	-5.2
Spain	14.3	8.5	-9.9	(3)	(3)	(3)
Ireland	11.1	8.8	-4.5	15.0	12.4	-3.7
Federal Republic of Germany	12.6	9.0	-6.5	11.6	7.9	-7.4
Luxembourg	11.5	9.0	-4.8	9.4	7.8	-3.7
Singapore	11.7	9.3	-4.5	13.5	10.9	-4.2
Belgium	11.0	9.4	-3.1	14.1	11.3	-4.3
United Kingdom	12.1	9.4	-4.9	13.5	9.9	-6.0
German Democratic Republic	12.1	9.6	-4.5	13.6	9.9	-6.2
Australia	11.0	9.9	-2.1	13.5	11.1	-3.8
Italy	14.6	10.3	-6.7	18.0	15.3	-5.3
United States	12.6	10.6	-3.4	13.3	10.8	-4.1
New Zealand	12.6	10.9	-2.9	12.0	8.9	-5.8
Austria	14.3	11.2	-4.8	14.2	10.1	-6.6
Israel	15.1	11.9	-4.7	13.0	12.1	-1.4
Malta	14.6	13.2	-2.0	---	---	---
Czechoslovakia	16.6	14.0	-3.3	16.3	12.7	-4.9
Greece	17.9	14.1	-4.7	18.9	14.9	-4.6
Bulgaria	20.2	15.4	-5.3	15.2	12.4	-4.0
Cuba	19.1	16.5	-2.9	23.8	19.4	-4.0
Portugal	23.9	17.8	-5.7	23.8	20.0	-3.4
Costa Rica	20.2	18.3	-2.4	(3)	(3)	(3)
Kuwait	27.7	18.4	-7.9	21.3	21.7	0.4
Poland	21.3	19.2	-2.1	16.9	16.6	-0.4
Chile	33.0	19.5	-10.0	22.0	13.6	-9.2
Hungary	23.2	20.4	-2.5	23.1	19.0	-3.8

[1]Data for Costa Rica are for 1984. Data for all other countries refer to 1985; of these, Belgium and Spain are provisional and all others are final.
[2]Data for Italy are for 1983. Data for Iceland and Costa Rica are for 1984. Data for all other countries refer to 1985.
[3]Registration coverage is incomplete or of unknown completeness.

NOTE: Rankings are from lowest to highest infant mortality rates based on the latest data available for countries or geographic areas with at least 200,000 population and with "complete" counts of live births and infant deaths as indicated in the United Nations *Demographic Yearbook, 1985*.

SOURCES: United Nations: *Demographic Yearbook, 1980, 1985,* and *1986*. Pub. Nos. ST/ESA/STAT/SER.R/10, ST/ESA/STAT/SER.R/15, in press. New York. United Nations, 1982, 1987, and 1988; National Center for Health Statistics: *Vital Statistics of the United States, 1980*, Vol. II, Mortality, Part A. DHHS Pub. No. (PHS) 85-1101. Public Health Service. Washington. U.S. Government Printing Office, 1985; *Vital Statistics of the United States, 1985*, Vol. II, Mortality, Part A. DHHS Pub. No. (PHS) 88-1101. Public Health Service. Washington. U.S. Government Printing Office, 1988. Australian Bureau of Statistics, Canberra, Australia. *Perinatal Deaths, Australia, 1985* and *Deaths, Australia, 1985*, 1986; Statistics Canada, Health Division, Ottawa, Canada. *Births and Deaths, Vital Statistics*, Volume 1, 1985, 1986; Federal Statistics Office, Prague, Czechoslovakia. *Statistical Yearbook of the Czechoslovak Socialist Republic 1986*, 1986; Statistisches Bundesamt, Wiesbaden, Federal Republic of Germany. Gesundheitswesen Fach Serie 12, Reihe 4, *Todesursachen, 1985*, 1986; Central Bureau of Statistics, Jerusalem, Israel. Unpublished data, Statistics and Information Department, Minister's Secretariat, Ministry of Health and Welfare, Tokyo, Japan. *Vital Statistics 1985*, Vol. 3; Statistisk Sentralbyra, Oslo, Norway. *Dodsarsaker 1986*; and unpublished data. Statistika Centralbyran, Stockholm, Sweden. *Befolknings Forandringar 1985*, Part 3, 1986; Bundesamt fur Statistik, Bern, Switzerland. *Bevolkerungsbewegung in der Schweiz, 1985*, 1987.

Table 20. Life expectancy at birth, according to sex: Selected countries, selected periods

[Data are based on reporting by countries]

Country	Period	Life expectancy in years	Period	Life expectancy in years
Male				
Japan	1979	73.5	1984	74.5
Sweden	1979	72.5	1984	73.8
Israel	1978	71.5	1984	73.1
Netherlands	1979	72.4	1983–84	73.0
Switzerland	1968–73	70.3	1981–82	72.7
Norway	1978–79	72.3	1982–83	72.7
Australia	1979	70.8	1984	72.6
Greece	1970	70.1	1980–85	72.1
Canada	1975–77	70.2	1980–82	71.9
England and Wales	1976–78	70.0	1982–84	71.6
Denmark	1976–79	71.3	1983–84	71.5
New Zealand	1975–77	69.0	1984	71.2
Cuba	1970	68.5	1977–78	71.2
United States	1980	70.0	1985	71.2
Federal Republic of Germany	1976–78	69.0	1982–84	70.8
Italy	1974–77	69.7	1977–79	70.6
Costa Rica	1972–74	66.3	1980–85	70.5
Finland	1979	68.9	1984	70.4
France	1977–79	69.9	1980–82	70.4
Spain	1970	69.7	1975	70.4
Jamaica	1959–61	62.7	1980–85	70.3
Ireland	1970–72	68.8	1980–82	70.1
Austria	1979	68.5	1984	70.1
Belgium	1972–76	68.6	1979–82	70.0
Scotland	1976–78	68.1	1982–84	69.9
Female				
Japan	1979	78.9	1984	80.2
Sweden	1979	78.7	1984	79.9
Switzerland	1968–73	76.2	1981–82	79.6
Netherlands	1979	78.9	1983–84	79.5
Norway	1978–79	78.7	1982–83	79.5
Australia	1979	77.8	1984	79.1
Canada	1975–77	77.5	1980–82	79.0
Finland	1979	77.2	1984	78.8
France	1977–79	78.0	1980–82	78.4
United States	1980	77.4	1985	78.2
New Zealand	1975–77	75.5	1984	77.7
England and Wales	1976–78	76.2	1982–84	77.6
Denmark	1978–79	77.4	1983–84	77.5
Federal Republic of Germany	1976–78	75.6	1982–84	77.5
Austria	1979	75.8	1984	77.3
Italy	1974–77	75.9	1977–79	77.2
Belgium	1972–76	75.1	1979–82	76.8
Israel	1978	75.0	1984	76.6
Spain	1970	75.0	1975	76.2
Greece	1970	73.6	1980–85	76.0
Scotland	1976–78	74.4	1982–84	75.9
Costa Rica	1972–74	70.5	1980–85	75.7
Jamaica	1959–61	66.6	1980–85	75.7
Northern Ireland	1976–78	74.1	1983	[1]75.7
Ireland	1970–72	73.5	1980–82	75.6

[1]Provisional.

NOTE: Rankings are from highest to lowest life expectancy based on the latest available data for countries or geographic areas with at least 1 million population and most recent data for 1970 or later. This table is based only on data from the official life tables of the country concerned, consistent with the data presented in the United Nations *Demographic Yearbook, 1985*.

SOURCES: United Nations: *Demographic Yearbook, 1980* and *1985*. Pub. Nos. ST/ESA/STAT/SER.R/10 and ST/ESA/STAT/SER.R/15. New York. United Nations, 1982 and 1987; National Center for Health Statistics: *Vital Statistics of the United States, 1980*, Vol. II, Mortality, Part A. DHHS Pub. No. (PHS) 85-1101. Public Health Service. Washington. U.S. Government Printing Office, 1985; Advance report of final mortality statistics, 1985. *Monthly Vital Statistics Report*. Vol. 36, No. 5, Supp. DHHS Pub. No. (PHS) 87-1120. Public Health Service. Hyattsville, Md., Aug. 28, 1987.

Table 21. Death rates for all causes, according to sex, race, and age: United States, selected years 1950–86

[Data are based on the National Vital Statistics System]

Sex, race, and age	1950[1]	1960[1]	1970	1980	1983	1984	1985	1986
	Deaths per 100,000 resident population							
All races								
All ages, age adjusted	841.5	760.9	714.3	585.8	550.5	545.9	546.1	541.7
All ages, crude	963.8	954.7	945.3	878.3	862.8	862.3	873.9	873.2
Under 1 year	3,299.2	2,696.4	2,142.4	1,288.3	1,107.3	1,085.6	1,067.8	1,032.1
1–4 years	139.4	109.1	84.5	63.9	55.9	51.9	51.4	52.0
5–14 years	60.1	46.6	41.3	30.6	26.9	26.7	26.3	26.0
15–24 years	128.1	106.3	127.7	115.4	96.0	96.8	95.9	102.3
25–34 years	178.7	146.4	157.4	135.5	121.4	121.1	123.4	132.1
35–44 years	358.7	299.4	314.5	227.9	201.9	204.8	207.2	212.9
45–54 years	853.9	756.0	730.0	584.0	535.7	521.1	516.3	504.8
55–64 years	1,911.7	1,735.1	1,658.8	1,346.3	1,299.5	1,287.8	1,282.7	1,255.1
65–74 years	4,067.7	3,822.1	3,582.7	2,994.9	2,874.3	2,848.1	2,838.6	2,801.4
75–84 years	9,331.1	8,745.2	8,004.4	6,692.6	6,441.5	6,399.3	6,445.1	6,348.2
85 years and over	20,196.9	19,857.5	17,539.4	15,980.3	15,168.0	15,223.6	15,480.3	15,398.9
White male								
All ages, age adjusted	963.1	917.7	893.4	745.3	698.4	689.9	688.7	679.8
All ages, crude	1,089.5	1,098.5	1,086.7	983.3	957.4	951.1	960.0	954.4
Under 1 year	3,400.5	2,694.1	2,113.2	1,230.3	1,052.9	1,038.4	1,033.9	976.6
1–4 years	135.5	104.9	83.6	66.1	57.3	51.8	52.4	52.2
5–14 years	67.2	52.7	48.0	35.0	31.1	30.5	29.9	29.9
15–24 years	152.4	143.7	170.8	167.0	137.0	136.8	136.3	145.9
25–34 years	185.3	163.2	176.6	171.3	154.8	154.3	157.1	168.8
35–44 years	380.9	332.6	343.5	257.4	232.9	235.1	241.4	248.4
45–54 years	984.5	932.2	882.9	698.9	636.5	617.9	608.8	592.2
55–64 years	2,304.4	2,225.2	2,202.6	1,728.5	1,642.9	1,625.5	1,614.3	1,573.1
65–74 years	4,864.9	4,848.4	4,810.1	4,035.7	3,816.1	3,745.3	3,716.8	3,634.8
75–84 years	10,526.3	10,299.6	10,098.8	8,829.8	8,556.9	8,459.1	8,500.4	8,341.7
85 years and over	22,116.3	21,750.0	20,392.6	19,097.3	18,443.3	18,552.7	18,788.9	18,576.1
Black male								
All ages, age adjusted	1,373.1	1,246.1	1,318.6	1,112.8	1,019.6	1,011.7	1,024.0	1,026.9
All ages, crude	1,260.3	1,181.7	1,186.6	1,034.1	963.3	958.1	976.8	987.7
Under 1 year	1,412.6	5,306.8	4,298.9	2,586.7	2,243.4	2,136.6	2,134.8	2,181.7
1–4 years		208.5	150.5	110.5	96.8	85.2	89.0	90.9
5–14 years	95.1	75.1	67.1	47.4	40.9	42.4	41.3	42.0
15–24 years	289.7	212.0	320.6	209.1	165.0	163.9	174.1	190.5
25–34 years	503.5	402.5	559.5	407.3	335.8	335.6	374.4	386.6
35–44 years	878.1	762.0	956.6	689.8	586.5	616.0	641.8	675.9
45–54 years	1,905.0	1,624.8	1,777.5	1,479.9	1,287.3	1,273.5	1,283.3	1,266.5
55–64 years	3,773.2	3,316.4	3,256.9	2,873.0	2,713.1	2,658.3	2,623.1	2,545.5
65–74 years	5,310.3	5,798.7	5,803.2	5,131.1	4,949.3	4,874.5	4,888.7	4,789.9
75–84 years	10,101.9	8,605.1	9,454.9	9,231.6	9,100.0	9,023.1	9,298.4	9,290.8
85 years and over		14,844.8	14,415.4	16,098.8	14,155.6	14,642.9	15,046.2	15,488.1
White female								
All ages, age adjusted	645.0	555.0	501.7	411.1	392.7	391.3	390.6	387.7
All ages, crude	803.3	800.9	812.6	806.1	815.3	822.3	837.1	840.7
Under 1 year	2,566.8	2,007.7	1,614.6	962.5	837.6	818.5	786.9	759.1
1–4 years	112.2	85.2	66.1	49.3	43.9	41.6	39.7	40.7
5–14 years	45.1	34.7	29.9	22.9	19.7	20.0	19.4	18.6
15–24 years	71.5	54.9	61.6	55.5	48.3	49.6	48.4	50.4
25–34 years	112.8	85.0	84.1	65.4	60.1	59.5	58.9	60.4
35–44 years	235.8	191.1	193.3	138.2	123.4	123.9	121.2	121.3
45–54 years	546.4	458.8	462.9	372.7	351.0	341.9	339.5	330.3
55–64 years	1,293.8	1,078.9	1,014.9	876.2	867.8	864.9	864.1	853.3
65–74 years	3,242.8	2,779.3	2,470.7	2,066.6	2,024.7	2,032.5	2,028.3	2,031.8
75–84 years	8,481.5	7,696.6	6,696.7	5,401.7	5,162.2	5,140.0	5,171.4	5,108.7
85 years and over	19,679.5	19,477.7	16,729.5	14,979.6	14,278.3	14,319.6	14,579.4	14,502.9
Black female								
All ages, age adjusted	1,106.7	916.9	814.4	631.1	590.4	585.3	589.1	588.2
All ages, crude	1,002.0	905.0	829.2	733.3	711.2	712.0	727.7	733.9
Under 1 year	1,139.3	4,162.2	3,368.8	2,123.7	1,818.6	1,789.1	1,756.6	1,731.1
1–4 years		173.3	129.4	84.4	73.6	72.2	70.3	76.5
5–14 years	72.8	53.8	43.8	30.5	28.0	27.8	28.1	26.9
15–24 years	213.1	107.5	111.9	70.5	65.6	61.6	59.5	64.3
25–34 years	393.3	273.2	231.0	150.0	130.0	130.6	136.3	146.5
35–44 years	758.1	568.5	533.0	323.9	276.1	285.7	278.4	290.2
45–54 years	1,576.4	1,177.0	1,043.9	768.2	685.8	655.0	654.0	654.6
55–64 years	3,089.4	2,510.9	1,986.2	1,561.0	1,526.3	1,489.7	1,501.7	1,469.8
65–74 years	4,000.2	4,064.2	3,860.9	3,057.4	2,930.6	2,907.4	2,925.7	2,892.3
75–84 years	8,347.0	6,730.0	6,691.5	6,212.1	6,064.6	6,164.1	6,252.0	6,148.8
85 years and over		13,052.6	12,131.7	12,367.2	11,329.5	11,439.1	12,154.7	12,510.3

[1] Includes deaths of nonresidents of the United States.

SOURCES: National Center for Health Statistics: *Vital Statistics of the United States*, Vol. II, Mortality, Part A, 1950–86. Public Health Service. Washington. U.S. Government Printing Office; Data computed by the Division of Analysis from data compiled by the Division of Vital Statistics and from table 1.

Table 22 (page 1 of 2). Age-adjusted death rates for selected causes of death, according to sex and race: United States, selected years 1950–86

[Data are based on the National Vital Statistics System]

Sex, race, and cause of death	1950[1]	1960[1]	1970	1980	1983	1984	1985	1986
	Deaths per 100,000 resident population							
All races								
All causes	841.5	760.9	714.3	585.8	550.5	545.9	546.1	541.7
Diseases of heart	307.6	286.2	253.6	202.0	188.8	183.6	180.5	175.0
Cerebrovascular diseases	88.8	79.7	66.3	40.8	34.4	33.4	32.3	31.0
Malignant neoplasms	125.4	125.8	129.9	132.8	132.6	133.5	133.6	133.2
Respiratory system	12.8	19.2	28.4	36.4	37.9	38.4	38.8	39.0
Colorectal	19.0	17.7	16.8	15.5	14.9	15.0	14.8	14.4
Prostate[2]	13.4	13.1	13.3	14.4	14.6	14.5	14.6	15.0
Breast[3]	22.2	22.3	23.1	22.7	22.7	23.2	23.2	23.1
Chronic obstructive pulmonary diseases	4.4	8.2	13.2	15.9	17.4	17.7	18.7	18.8
Pneumonia and influenza	26.2	28.0	22.1	12.9	11.8	12.2	13.4	13.5
Chronic liver disease and cirrhosis	8.5	10.5	14.7	12.2	10.2	10.0	9.6	9.2
Diabetes mellitus	14.3	13.6	14.1	10.1	9.9	9.5	9.6	9.6
Accidents and adverse effects	57.5	49.9	53.7	42.3	35.3	35.0	34.7	35.2
Motor vehicle accidents	23.3	22.5	27.4	22.9	18.5	19.1	18.8	19.4
Suicide	11.0	10.6	11.8	11.4	11.4	11.6	11.5	11.9
Homicide and legal intervention	5.4	5.2	9.1	10.8	8.6	8.4	8.3	9.0
White male								
All causes	963.1	917.7	893.4	745.3	698.4	689.9	688.7	679.8
Diseases of heart	381.1	375.4	347.6	277.5	257.8	249.5	244.5	234.8
Cerebrovascular diseases	87.0	80.3	68.8	41.9	35.2	33.9	32.8	31.1
Malignant neoplasms	130.9	141.6	154.3	160.5	158.9	159.0	159.2	158.8
Respiratory system	21.6	34.6	49.9	58.0	58.0	58.4	58.2	58.0
Colorectal	19.8	18.9	18.9	18.3	17.8	17.8	17.6	17.2
Prostate	13.1	12.4	12.3	13.2	13.4	13.3	13.3	13.8
Chronic obstructive pulmonary diseases	6.0	13.8	24.0	26.7	27.6	27.6	26.5	26.1
Pneumonia and influenza	27.1	31.0	26.0	16.2	15.3	15.8	17.4	17.5
Chronic liver disease and cirrhosis	11.5	14.4	18.8	15.7	13.4	13.2	12.6	12.2
Diabetes mellitus	11.3	11.6	12.7	9.5	9.2	9.0	9.2	9.1
Accidents and adverse effects	80.9	70.5	76.2	62.3	51.8	51.3	50.4	51.1
Motor vehicle accidents	35.9	34.0	40.1	34.8	27.8	28.4	27.6	28.7
Suicide	18.1	17.5	18.2	18.9	19.3	19.7	19.9	20.5
Homicide and legal intervention	3.9	3.9	7.3	10.9	8.4	8.2	8.1	8.4
Black male								
All causes	1,373.1	1,246.1	1,318.6	1,112.8	1,019.6	1,011.7	1,024.0	1,026.9
Diseases of heart	415.5	381.2	375.9	327.3	308.2	300.1	301.0	294.3
Cerebrovascular diseases	146.2	141.2	124.2	77.5	64.2	62.8	60.8	58.9
Malignant neoplasms	126.1	158.5	196.0	229.9	232.2	234.9	231.6	229.0
Respiratory system	16.9	36.6	60.8	82.0	83.3	85.9	84.4	83.9
Colorectal	13.8	15.0	17.3	19.2	19.0	19.9	19.5	19.3
Prostate	16.9	22.2	25.4	29.1	29.9	29.7	30.3	30.3
Chronic obstructive pulmonary diseases	- - -	- - -	- - -	20.9	22.2	22.8	23.9	24.6
Pneumonia and influenza	63.8	70.2	53.8	28.0	24.3	25.2	26.8	27.2
Chronic liver disease and cirrhosis	8.8	14.8	33.1	30.6	22.8	22.5	23.4	20.8
Diabetes mellitus	11.5	16.2	21.2	17.7	17.7	17.6	17.7	17.9
Accidents and adverse effects	105.7	100.0	119.5	82.0	66.2	64.7	66.7	66.9
Motor vehicle accidents	39.8	38.2	50.1	32.9	26.4	27.2	27.7	29.2
Suicide	7.0	7.8	9.9	11.1	10.5	11.2	11.3	11.5
Homicide and legal intervention	51.1	44.9	82.1	71.9	53.8	50.8	49.9	55.9
White female								
All causes	645.0	555.0	501.7	411.1	392.7	391.3	390.6	387.7
Diseases of heart	223.6	197.1	167.8	134.6	126.7	124.0	121.7	119.0
Cerebrovascular diseases	79.7	68.7	56.2	35.2	29.6	28.9	27.9	27.1
Malignant neoplasms	119.4	109.5	107.6	107.7	108.5	109.9	110.3	110.1
Respiratory system	4.6	5.1	10.1	18.2	21.0	21.6	22.6	23.1
Colorectal	19.0	17.0	15.3	13.3	12.5	12.8	12.3	12.0
Breast	22.5	22.4	23.4	22.8	22.7	23.1	23.3	23.0
Chronic obstructive pulmonary diseases	2.8	3.3	5.3	9.2	11.3	11.8	12.9	13.3
Pneumonia and influenza	16.9	19.0	15.0	9.4	8.6	8.8	9.8	9.9
Chronic liver disease and cirrhosis	5.8	6.6	8.7	7.0	6.0	5.9	5.6	5.4
Diabetes mellitus	16.4	13.7	12.8	8.7	8.6	8.0	8.1	8.1
Accidents and adverse effects	30.6	25.5	27.2	21.4	18.3	18.5	18.4	18.4
Motor vehicle accidents	10.6	11.1	14.4	12.3	10.3	10.9	10.8	11.0
Suicide	5.3	5.3	7.2	5.7	5.6	5.6	5.3	5.4
Homicide and legal intervention	1.4	1.5	2.2	3.2	2.8	2.9	2.9	2.9

See footnotes at end of table.

Table 22 (page 2 of 2). Age-adjusted death rates for selected causes of death, according to sex and race: United States, selected years 1950–86

[Data are based on the National Vital Statistics System]

Sex, race, and cause of death	1950[1]	1960[1]	1970	1980	1983	1984	1985	1986
	Deaths per 100,000 resident population							
Black female								
All causes	1,106.7	916.9	814.4	631.1	590.4	585.3	589.1	588.2
Diseases of heart	349.5	292.6	251.7	201.1	191.5	186.6	186.8	185.1
Cerebrovascular diseases	155.6	139.5	107.9	61.7	53.8	51.8	50.3	47.6
Malignant neoplasms	131.9	127.8	123.5	129.7	129.8	131.0	130.4	132.1
Respiratory system	4.1	5.5	10.9	19.5	22.0	21.4	22.5	23.3
Colorectal	15.0	15.4	16.1	15.3	15.1	15.3	16.1	15.2
Breast	19.3	21.3	21.5	23.3	24.4	26.1	25.3	25.8
Chronic obstructive pulmonary diseases	- - -	- - -	- - -	6.3	7.6	8.1	8.7	8.9
Pneumonia and influenza	50.4	43.9	29.2	12.7	10.2	11.3	12.4	13.1
Chronic liver disease and cirrhosis	5.7	8.9	17.8	14.4	10.8	10.3	10.1	9.3
Diabetes mellitus	22.7	27.3	30.9	22.1	21.1	20.5	21.1	21.4
Accidents and adverse effects	38.5	35.9	35.3	25.1	21.9	20.1	20.7	21.0
Motor vehicle accidents	10.3	10.0	13.8	8.4	7.5	7.6	8.2	8.5
Suicide	1.7	1.9	2.9	2.4	2.1	2.3	2.1	2.4
Homicide and legal intervention	11.7	11.8	15.0	13.7	11.2	11.0	10.8	11.8

[1]Includes deaths of nonresidents of the United States.
[2]Male only.
[3]Female only.

NOTE: For data years shown, the code numbers for cause of death are based on the then current *International Classification of Diseases*, which are described in Appendix II, tables IV and V.

SOURCES: National Center for Health Statistics: *Vital Statistics Rates in the United States, 1940–1960*, by R. D. Grove and A. M. Hetzel. DHEW Pub. No. (PHS) 1677. Public Health Service. Washington. U.S. Government Printing Office, 1968; Unpublished data from the Division of Vital Statistics; *Vital Statistics of the United States*, Vol. II, Mortality, Part A, 1950–86. Public Health Service. Washington. U.S. Government Printing Office; Data compiled by the Division of Analysis from data compiled by the Division of Vital Statistics and from table 1.

Table 23 (page 1 of 2). Years of potential life lost before age 65 for selected causes of death, according to sex and race: United States, 1980, 1985, and 1986

[Data are based on the National Vital Statistics System]

Sex, race, and cause of death	Years lost in thousands			Years lost per 1,000 population under 65 years of age		
	1980	1985	1986	1980	1985	1986
All races						
All causes	12,896	11,859	12,093	64.2	56.4	57.1
Diseases of heart	1,691	1,577	1,557	8.4	7.5	7.3
Cerebrovascular diseases	263	251	246	1.4	1.2	1.2
Malignant neoplasms	1,824	1,834	1,832	9.1	8.7	8.6
Respiratory system	426	435	431	2.1	2.1	2.0
Colorectal	138	136	133	0.7	0.6	0.6
Prostate[1]	17	18	18	0.1	0.1	0.1
Breast[2]	212	224	228	1.1	1.1	1.1
Chronic obstructive pulmonary diseases	115	128	129	0.6	0.6	0.6
Pneumonia and influenza	196	170	175	1.0	0.8	0.8
Chronic liver disease and cirrhosis	292	238	232	1.5	1.1	1.1
Diabetes mellitus	113	115	121	0.6	0.5	0.6
Accidents and adverse effects	2,760	2,279	2,358	13.7	10.8	11.1
Motor vehicle accidents	1,690	1,385	1,456	8.4	6.6	6.9
Suicide	621	657	680	3.1	3.1	3.2
Homicide and legal intervention	751	611	680	3.7	2.9	3.2
White male						
All causes	6,520	5,916	6,016	76.1	66.8	67.5
Diseases of heart	1,010	914	892	11.8	10.3	10.0
Cerebrovascular diseases	105	92	89	1.2	1.0	1.0
Malignant neoplasms	801	784	783	9.4	8.8	8.8
Respiratory system	245	236	233	2.9	2.7	2.6
Colorectal	63	63	61	0.7	0.7	0.7
Prostate	13	13	14	0.2	0.1	0.2
Chronic obstructive pulmonary diseases	55	56	57	0.6	0.6	0.6
Pneumonia and influenza	76	69	72	0.9	0.8	0.8
Chronic liver disease and cirrhosis	143	121	119	1.7	1.4	1.3
Diabetes mellitus	45	48	50	0.5	0.5	0.6
Accidents and adverse effects	1,774	1,420	1,464	20.7	16.0	16.4
Motor vehicle accidents	1,115	870	918	13.0	9.8	10.3
Suicide	436	468	487	5.1	5.3	5.5
Homicide and legal intervention	313	243	260	3.7	2.7	2.9
Black male						
All causes	1,688	1,597	1,697	143.8	125.4	131.2
Diseases of heart	195	197	199	16.6	15.4	15.4
Cerebrovascular diseases	41	37	38	3.5	2.9	2.9
Malignant neoplasms	138	144	143	11.7	11.3	11.1
Respiratory system	47	49	48	4.0	3.8	3.7
Colorectal	9	10	10	0.8	0.8	0.8
Prostate	4	4	4	0.3	0.3	0.3
Chronic obstructive pulmonary diseases	13	14	15	1.1	1.1	1.2
Pneumonia and influenza	37	32	32	3.2	2.5	2.5
Chronic liver disease and cirrhosis	46	39	36	3.9	3.0	2.8
Diabetes mellitus	12	13	14	1.0	1.0	1.1
Accidents and adverse effects	271	238	253	23.1	18.7	19.6
Motor vehicle accidents	120	113	124	10.2	8.8	9.6
Suicide	38	42	43	3.3	3.3	3.4
Homicide and legal intervention	267	213	250	22.8	16.7	19.3
White female						
All causes	3,425	3,117	3,109	39.8	35.3	35.0
Diseases of heart	345	325	321	4.0	3.7	3.6
Cerebrovascular diseases	96	82	80	1.1	0.9	0.9
Malignant neoplasms	738	745	737	8.6	8.4	8.3
Respiratory system	114	128	126	1.3	1.4	1.4
Colorectal	55	51	50	0.6	0.6	0.6
Breast	182	189	189	2.1	2.1	2.1
Chronic obstructive pulmonary diseases	37	46	45	0.4	0.5	0.5
Pneumonia and influenza	55	46	46	0.6	0.5	0.5
Chronic liver disease and cirrhosis	68	52	50	0.8	0.6	0.6
Diabetes mellitus	39	38	41	0.5	0.4	0.5
Accidents and adverse effects	557	489	479	6.5	5.3	5.4
Motor vehicle accidents	376	320	329	4.4	3.6	3.7
Suicide	125	121	124	1.5	1.4	1.4
Homicide and legal intervention	94	86	91	1.1	1.0	1.0

See footnotes at end of table.

Table 23 (page 2 of 2). Years of potential life lost before age 65 for selected causes of death, according to sex and race: United States, 1980, 1985, and 1986

[Data are based on the National Vital Statistics System]

Sex, race, and cause of death	Years lost in thousands			Years lost per 1,000 population under 65 years of age		
	1980	1985	1986	1980	1985	1986
Black female						
All causes	1,015	951	983	79.3	69.0	70.3
Diseases of heart	120	117	120	9.4	8.5	8.6
Cerebrovascular diseases	37	34	33	2.9	2.5	2.4
Malignant neoplasms	124	128	135	9.7	9.3	9.7
Respiratory system	17	19	19	1.3	1.4	1.4
Colorectal	9	10	10	0.7	0.7	0.7
Breast	27	32	36	2.1	2.3	2.6
Chronic obstructive pulmonary diseases	8	10	10	0.7	0.7	0.7
Pneumonia and influenza	24	19	21	1.8	1.4	1.5
Chronic liver disease and cirrhosis	27	20	19	2.1	1.5	1.4
Diabetes mellitus	14	14	15	1.1	1.0	1.0
Accidents and adverse effects	92	84	90	7.2	6.1	6.4
Motor vehicle accidents	38	39	41	3.0	2.8	2.9
Suicide	9	8	9	0.7	0.6	0.7
Homicide and legal intervention	63	55	62	4.9	4.0	4.4

[1] Male only.
[2] Female only.

NOTE: For data years shown, the code numbers for cause of death are based on the then current *International Classification of Diseases*, which are described in Appendix II, tables IV and V.

SOURCES: National Center for Health Statistics: *Vital Statistics of the United States*, Vol. II, Mortality, Part A, 1980–86. Public Health Service. Washington. U.S. Government Printing Office; Data computed by the Division of Analysis from data compiled by the Division of Vital Statistics and from table 1.

Table 24. Death rates for diseases of heart, according to sex, race, and age: United States, selected years 1950–86

[Data are based on the National Vital Statistics System]

Sex, race, and age	1950[1]	1960[1]	1970	1980	1983	1984	1985	1986
	Deaths per 100,000 resident population							
All races								
All ages, age adjusted	307.6	286.2	253.6	202.0	188.8	183.6	180.5	175.0
All ages, crude	356.5	369.0	362.0	336.0	329.2	323.5	323.0	317.5
Under 1 year	3.5	6.6	13.1	22.8	26.0	26.1	24.5	26.1
1–4 years	1.3	1.3	1.7	2.6	2.5	2.4	2.1	2.5
5–14 years	2.1	1.3	0.8	0.9	0.9	1.0	0.9	0.9
15–24 years	6.8	4.0	3.0	2.9	2.6	2.7	2.8	2.8
25–34 years	19.4	15.6	11.4	8.3	8.3	8.0	8.2	8.6
35–44 years	86.4	74.6	66.7	44.6	39.3	38.7	38.0	37.5
45–54 years	308.6	271.8	238.4	180.2	164.7	156.7	152.9	144.6
55–64 years	606.1	737.9	652.3	494.1	463.0	450.3	439.1	424.2
65–74 years	1,839.8	1,740.5	1,558.2	1,218.6	1,139.2	1,102.7	1,060.6	1,043.0
75–84 years	4,310.1	4,089.4	3,683.8	2,993.1	2,816.3	2,748.6	2,712.6	2,637.5
85 years and over	9,150.6	9,317.8	8,468.0	7,777.1	7,335.5	7,251.0	7,275.0	7,178.7
White male								
All ages, age adjusted	381.1	375.4	347.6	277.5	257.8	249.5	244.5	234.8
All ages, crude	433.0	454.6	438.3	384.0	370.9	361.8	358.9	348.6
Under 1 year	4.1	6.9	12.0	22.5	24.1	24.6	23.8	26.0
1–4 years	1.1	1.0	1.5	2.1	2.2	2.2	1.7	2.1
5–14 years	1.7	1.1	0.8	0.9	0.9	0.9	0.8	0.9
15–24 years	5.8	3.6	3.0	2.9	2.7	2.8	3.0	3.0
25–34 years	20.1	17.6	12.3	9.1	9.6	9.2	9.2	9.5
35–44 years	110.6	107.5	94.6	61.8	55.3	54.0	52.4	51.7
45–54 years	423.6	413.2	365.7	269.8	243.0	231.2	224.4	208.8
55–64 years	1,081.7	1,056.0	979.3	730.6	674.1	655.5	635.6	610.3
65–74 years	2,308.3	2,297.9	2,177.2	1,729.7	1,603.6	1,533.0	1,501.0	1,440.9
75–84 years	4,907.3	4,839.9	4,617.6	3,883.2	3,664.3	3,579.3	3,532.9	3,405.2
85 years and over	9,950.5	10,135.8	9,693.0	8,958.0	8,503.4	8,416.4	8,396.3	8,138.4
Black male								
All ages, age adjusted	415.5	381.2	375.9	327.3	308.2	300.1	301.0	294.3
All ages, crude	348.4	330.6	330.3	301.0	288.5	282.2	285.0	281.3
Under 1 year	4.8	13.9	33.5	42.8	54.5	48.4	46.7	49.8
1–4 years		3.8	3.9	6.3	5.1	4.4	4.4	5.3
5–14 years	6.4	3.0	1.4	1.3	1.5	1.5	1.5	1.4
15–24 years	18.0	8.7	8.3	8.3	6.6	6.7	7.2	6.7
25–34 years	51.9	43.1	41.6	30.3	27.5	27.5	29.1	29.3
35–44 years	196.1	168.1	169.2	136.6	115.9	121.1	122.0	123.6
45–54 years	624.1	514.0	512.8	433.4	396.2	384.6	382.4	365.1
55–64 years	1,434.0	1,236.8	1,135.4	987.2	928.0	895.9	882.6	864.9
65–74 years	2,140.1	2,281.4	2,237.8	1,847.2	1,804.5	1,734.7	1,738.4	1,673.1
75–84 years	4,107.9	3,533.6	3,783.4	3,578.8	3,457.5	3,375.7	3,450.0	3,407.3
85 years and over		6,037.9	6,330.8	6,619.5	5,907.9	6,015.9	6,098.5	6,268.7
White female								
All ages, age adjusted	223.6	197.1	167.8	134.6	126.7	124.0	121.7	119.0
All ages, crude	269.4	306.5	313.8	319.2	321.5	319.3	320.7	319.0
Under 1 year	2.7	4.3	7.0	15.7	19.3	20.3	18.3	19.1
1–4 years	1.1	0.9	1.2	2.1	2.1	2.0	1.8	2.1
5–14 years	1.9	0.9	0.7	0.8	0.8	0.9	0.9	0.7
15–24 years	5.3	2.8	1.7	1.7	1.6	1.8	1.7	1.6
25–34 years	12.2	8.2	5.5	3.9	3.8	3.7	3.8	4.1
35–44 years	40.5	28.6	23.9	16.4	14.5	14.1	14.3	13.8
45–54 years	141.9	103.4	91.4	71.2	67.4	63.1	62.1	59.8
55–64 years	460.2	383.0	317.7	248.1	237.5	231.6	225.8	221.4
65–74 years	1,400.9	1,229.8	1,044.0	796.7	745.6	735.3	713.7	693.9
75–84 years	3,925.2	3,629.7	3,143.5	2,493.6	2,332.4	2,273.1	2,233.3	2,160.2
85 years and over	9,084.7	9,260.8	8,207.5	7,501.6	7,133.7	7,044.7	7,089.3	7,021.3
Black female								
All ages, age adjusted	349.5	292.6	251.7	201.1	191.5	186.6	186.8	185.1
All ages, crude	289.9	268.5	261.0	249.7	248.1	244.6	248.1	250.8
Under 1 year	3.9	12.0	31.3	43.6	45.6	45.1	39.5	42.8
1–4 years		2.8	4.2	4.4	3.6	4.3	5.2	4.8
5–14 years	8.8	3.0	1.8	1.7	1.1	1.4	1.7	1.5
15–24 years	19.8	10.0	6.0	4.6	4.4	4.3	4.6	4.6
25–34 years	52.0	35.9	24.7	15.7	13.6	12.5	13.1	15.3
35–44 years	185.0	125.3	99.8	61.7	53.0	52.8	50.4	50.1
45–54 years	526.8	360.7	290.9	202.4	182.8	174.1	172.6	172.5
55–64 years	1,210.7	952.3	710.5	530.1	517.7	499.6	500.4	479.0
65–74 years	1,659.4	1,680.5	1,553.2	1,210.3	1,159.8	1,127.1	1,133.6	1,108.3
75–84 years	3,499.3	2,926.9	2,964.1	2,707.2	2,660.1	2,618.9	2,606.0	2,623.5
85 years and over		5,650.0	5,669.8	5,796.5	5,298.4	5,315.0	5,441.0	5,696.6

[1] Includes deaths of nonresidents of the United States.

NOTE: For data years shown, the code numbers for cause of death are based on the then current *International Classification of Diseases*, which are described in Appendix II, tables IV and V.

SOURCES: National Center for Health Statistics: *Vital Statistics of the United States*, Vol. II, Mortality, Part A, 1950–86. Public Health Service. Washington. U.S. Government Printing Office; Data computed by the Division of Analysis from data compiled by the Division of Vital Statistics and from table 1.

Table 25. Death rates for cerebrovascular diseases, according to sex, race, and age: United States, selected years 1950–86

[Data are based on the National Vital Statistics System]

Sex, race, and age	1950[1]	1960[1]	1970	1980	1983	1984	1985	1986
	Deaths per 100,000 resident population							
All races								
All ages, age adjusted	88.8	79.7	66.3	40.8	34.4	33.4	32.3	31.0
All ages, crude	104.0	108.0	101.9	75.1	66.5	65.3	64.1	62.1
Under 1 year	5.1	4.1	5.0	4.4	3.9	3.0	3.6	2.9
1–4 years	0.9	0.8	1.0	0.5	0.4	0.4	0.3	0.3
5–14 years	0.5	0.7	0.7	0.3	0.3	0.3	0.2	0.2
15–24 years	1.6	1.8	1.6	1.0	0.8	0.8	0.8	0.7
25–34 years	4.2	4.7	4.5	2.6	2.2	2.2	2.1	2.2
35–44 years	18.7	14.7	15.6	8.5	7.3	7.5	7.2	7.1
45–54 years	70.4	49.2	41.6	25.2	22.8	22.6	21.1	20.4
55–64 years	195.3	147.3	115.8	65.2	57.6	55.8	54.3	53.0
65–74 years	549.7	469.2	384.1	219.5	182.2	177.0	171.3	164.1
75–84 years	1,499.6	1,491.3	1,254.2	788.6	652.7	626.2	605.8	573.8
85 years and over	2,990.1	3,680.5	3,234.6	2,288.9	1,912.5	1,883.6	1,837.5	1,762.6
White male								
All ages, age adjusted	87.0	80.3	68.8	41.9	35.2	33.9	32.8	31.1
All ages, crude	100.5	102.7	93.5	63.3	55.5	53.8	52.5	50.5
Under 1 year	5.9	4.3	4.5	3.8	4.0	2.6	3.7	2.5
1–4 years	1.1	0.8	1.2	0.4	0.5	0.3	0.3	0.2
5–14 years	0.5	0.7	0.8	0.2	0.2	0.2	0.2	0.2
15–24 years	1.6	1.7	1.6	1.0	0.8	0.8	0.7	0.7
25–34 years	3.4	3.5	3.2	2.0	1.9	1.8	1.8	1.8
35–44 years	13.1	11.3	11.8	6.5	5.5	5.9	5.4	5.7
45–54 years	53.7	40.9	35.6	21.7	19.1	19.3	18.0	16.5
55–64 years	182.2	139.0	119.9	64.2	56.5	54.3	54.2	51.4
65–74 years	569.7	501.0	420.0	240.4	197.1	190.4	183.7	171.4
75–84 years	1,556.3	1,564.8	1,361.6	854.8	714.8	671.1	651.1	617.3
85 years and over	3,127.1	3,734.8	3,317.6	2,236.9	1,862.9	1,846.4	1,747.8	1,697.0
Black male								
All ages, age adjusted	146.2	141.2	124.2	77.5	64.2	62.8	60.8	58.9
All ages, crude	122.0	122.9	108.7	73.1	61.3	60.0	58.5	57.1
Under 1 year	2.5	8.5	12.2	11.2	7.5	8.2	9.8	8.0
1–4 years		1.9	1.4	0.6	0.2	0.8	0.8	0.5
5–14 years	0.7	0.9	0.8	0.5	0.4	0.6	0.1	0.2
15–24 years	3.3	3.7	3.0	2.1	1.4	1.2	1.3	1.1
25–34 years	12.0	12.8	14.6	7.7	5.9	5.7	5.7	6.1
35–44 years	59.3	47.4	52.7	29.2	24.3	26.0	25.9	27.2
45–54 years	211.9	166.1	136.2	82.1	74.1	72.9	70.6	68.2
55–64 years	522.8	439.9	343.4	189.8	163.8	159.0	151.6	144.3
65–74 years	783.6	899.2	780.0	472.8	388.0	379.8	358.9	337.8
75–84 years	1,504.9	1,475.2	1,442.6	1,067.6	844.1	819.5	817.6	809.9
85 years and over		2,700.0	2,315.4	1,873.2	1,479.4	1,395.2	1,363.1	1,350.7
White female								
All ages, age adjusted	79.7	68.7	56.2	35.2	29.6	28.9	27.9	27.1
All ages, crude	103.3	110.1	109.6	88.8	79.8	79.2	78.1	76.2
Under 1 year	2.9	2.6	3.2	3.3	2.5	2.6	2.2	1.8
1–4 years	0.6	0.5	0.6	0.4	0.2	0.3	0.3	0.2
5–14 years	0.4	0.6	0.6	0.3	0.3	0.3	0.3	0.2
15–24 years	1.2	1.4	1.1	0.7	0.7	0.6	0.7	0.6
25–34 years	2.9	3.4	3.4	2.0	1.6	1.6	1.6	1.6
35–44 years	13.6	10.1	11.5	6.7	5.6	5.6	5.3	5.0
45–54 years	55.0	33.8	30.5	18.7	16.9	17.0	15.4	15.5
55–64 years	156.9	103.0	78.1	48.7	42.6	42.0	39.7	40.1
65–74 years	498.1	383.3	303.2	172.8	144.6	140.9	138.0	136.3
75–84 years	1,471.3	1,444.7	1,176.8	730.3	602.0	580.9	559.4	530.7
85 years and over	3,017.9	3,795.7	3,316.1	2,367.8	1,986.5	1,962.5	1,923.0	1,837.3
Black female								
All ages, age adjusted	155.6	139.5	107.9	61.7	53.8	51.8	50.3	47.6
All ages, crude	128.3	127.7	112.1	77.9	70.5	68.5	68.0	65.0
Under 1 year	2.8	6.7	9.1	6.4	7.3	3.3	5.3	5.3
1–4 years		1.3	1.4	0.5	0.5	0.5	0.5	0.4
5–14 years	0.6	1.0	0.8	0.3	0.4	0.4	0.3	0.3
15–24 years	4.2	3.4	3.0	1.7	1.6	1.7	1.5	1.0
25–34 years	15.9	17.4	14.3	7.0	5.1	6.1	5.6	6.0
35–44 years	75.0	57.4	49.1	21.6	20.1	19.2	19.3	18.5
45–54 years	248.9	166.2	119.4	61.9	55.7	50.3	49.8	46.4
55–64 years	567.7	452.0	272.5	138.7	126.0	112.6	111.3	109.4
65–74 years	754.4	830.5	673.4	362.2	308.4	304.6	281.5	268.5
75–84 years	1,496.7	1,413.1	1,337.8	918.6	786.7	803.4	775.4	710.7
85 years and over		2,578.9	2,504.8	1,896.3	1,603.1	1,470.7	1,585.6	1,504.1

[1] Includes deaths of nonresidents of the United States.

NOTE: For data years shown, the code numbers for cause of death are based on the then current *International Classification of Diseases*, which are described in Appendix II, tables IV and V.

SOURCES: National Center for Health Statistics: *Vital Statistics of the United States*, Vol. II, Mortality, Part A, 1950–86. Public Health Service. Washington. U.S. Government Printing Office; Data compiled by the Division of Analysis from data compiled by the Division of Vital Statistics and from table 1.

Table 28. Death rates for malignant neoplasms, according to sex, race, and age: United States, selected years 1950–86

[Data are based on the National Vital Statistics System]

Sex, race, and age	1950[1]	1960[1]	1970	1980	1983	1984	1985	1986
	Deaths per 100,000 resident population							
All races								
All ages, age adjusted	125.4	125.8	129.9	132.8	132.6	133.5	133.6	133.2
All ages, crude	139.8	149.2	162.8	183.9	189.3	191.8	193.3	194.7
Under 1 year	8.7	7.2	4.7	3.2	3.8	3.1	3.0	2.8
1–4 years	11.7	10.9	7.5	4.5	4.7	4.0	3.8	4.0
5–14 years	6.7	6.8	6.0	4.3	3.9	3.6	3.5	3.4
15–24 years	8.6	8.3	8.3	6.3	5.6	5.5	5.4	5.4
25–34 years	20.0	19.5	16.5	13.7	12.8	13.0	13.1	13.1
35–44 years	62.7	59.7	59.5	48.6	45.6	46.6	45.7	45.3
45–54 years	175.1	177.0	182.5	180.0	172.2	170.5	169.1	165.7
55–64 years	392.9	396.8	423.0	436.1	443.0	448.4	450.5	444.4
65–74 years	692.5	713.9	754.2	817.9	829.3	835.1	838.3	847.0
75–84 years	1,153.3	1,127.4	1,168.0	1,232.3	1,254.7	1,272.3	1,281.0	1,287.3
85 years and over	1,451.0	1,450.0	1,417.3	1,594.6	1,583.4	1,604.0	1,591.5	1,612.0
White male								
All ages, age adjusted	130.9	141.6	154.3	160.5	158.9	159.0	159.2	158.8
All ages, crude	147.2	166.1	185.1	208.7	213.8	215.1	217.2	218.8
Under 1 year	9.6	7.9	4.3	3.5	3.5	2.7	3.1	3.0
1–4 years	13.1	13.1	8.5	5.4	5.3	4.4	4.4	4.7
5–14 years	7.6	8.0	7.0	5.2	4.4	4.1	4.0	3.9
15–24 years	9.9	10.3	10.6	7.8	6.7	6.8	6.5	6.8
25–34 years	17.7	18.8	16.2	13.6	12.6	12.5	13.0	13.5
35–44 years	44.5	46.3	50.1	41.1	38.3	38.5	39.5	37.7
45–54 years	150.8	164.1	172.0	175.4	166.7	164.0	161.2	158.5
55–64 years	409.4	450.9	498.1	497.4	499.5	504.5	508.4	504.3
65–74 years	798.7	887.3	997.0	1,070.7	1,063.7	1,064.1	1,061.2	1,063.3
75–84 years	1,367.6	1,413.7	1,592.7	1,779.7	1,805.3	1,806.9	1,820.1	1,827.0
85 years and over	1,732.7	1,791.4	1,948.1	2,375.6	2,416.3	2,438.6	2,424.5	2,462.3
Black male								
All ages, age adjusted	126.1	158.5	198.0	229.9	232.2	234.9	231.6	229.0
All ages, crude	106.6	136.7	171.6	205.5	210.5	214.0	212.2	211.4
Under 1 year	8.2	6.8	5.3	4.5	3.9	3.2	2.4	1.7
1–4 years		7.9	7.6	5.1	4.7	3.5	3.3	3.1
5–14 years	5.8	4.4	4.8	3.7	4.1	3.6	3.6	3.8
15–24 years	7.9	9.7	9.4	8.1	5.6	6.4	6.4	6.3
25–34 years	18.0	18.4	18.8	14.1	14.7	15.8	14.7	14.2
35–44 years	55.7	72.9	81.3	73.8	70.7	74.4	71.2	71.4
45–54 years	211.7	244.7	311.2	333.0	315.5	314.1	313.6	303.6
55–64 years	490.8	579.7	689.2	812.5	821.6	841.7	803.3	776.0
65–74 years	636.4	938.5	1,168.9	1,417.2	1,457.4	1,444.9	1,448.7	1,455.1
75–84 years	853.5	1,053.3	1,624.8	2,029.6	2,196.8	2,226.3	2,238.3	2,249.2
85 years and over		1,155.2	1,635.9	2,393.9	2,219.0	2,471.4	2,507.7	2,620.9
White female								
All ages, age adjusted	119.4	109.5	107.6	107.7	108.5	109.9	110.3	110.1
All ages, crude	139.9	139.8	149.4	170.3	177.9	181.7	183.7	185.6
Under 1 year	7.8	6.8	5.4	2.7	3.5	2.9	3.0	2.4
1–4 years	11.3	9.7	6.9	3.6	4.4	3.8	3.5	3.4
5–14 years	6.3	6.2	5.4	3.7	3.4	3.0	3.1	3.1
15–24 years	7.5	6.5	6.2	4.7	4.6	4.3	4.3	4.2
25–34 years	20.9	18.8	16.3	13.5	12.3	12.8	12.6	12.1
35–44 years	74.5	66.6	62.4	50.9	48.0	49.0	47.0	47.4
45–54 years	185.8	175.7	177.3	166.4	160.0	160.0	160.6	155.6
55–64 years	362.5	329.0	338.6	355.5	366.8	370.0	374.1	369.4
65–74 years	616.5	562.1	554.7	605.2	627.4	638.6	645.3	658.7
75–84 years	1,026.6	939.3	903.5	905.4	919.5	944.2	949.2	956.4
85 years and over	1,348.3	1,304.9	1,179.4	1,266.8	1,265.7	1,284.3	1,270.9	1,283.6
Black female								
All ages, age adjusted	131.9	127.8	123.5	129.7	129.8	131.0	130.4	132.1
All ages, crude	111.8	113.8	117.3	136.5	140.7	142.9	143.9	146.7
Under 1 year	7.0	6.7	3.3	3.0	3.3	2.5	4.3	2.8
1–4 years		6.9	5.7	3.9	3.1	3.1	2.5	4.3
5–14 years	3.9	4.8	4.0	3.4	3.6	3.3	3.0	2.9
15–24 years	8.8	6.9	6.4	5.7	5.0	4.3	4.3	4.7
25–34 years	34.3	31.0	20.9	18.3	17.3	16.5	17.0	17.8
35–44 years	119.8	102.4	94.6	73.5	68.9	74.3	69.5	72.2
45–54 years	277.0	254.8	228.6	230.2	217.8	215.1	208.1	215.3
55–64 years	484.6	442.7	404.8	450.4	452.9	462.2	465.4	451.6
65–74 years	477.3	541.6	615.8	662.4	694.2	685.8	694.2	717.5
75–84 years	605.3	698.3	763.3	923.9	972.4	1,013.7	1,014.6	1,017.9
85 years and over		728.9	896.8	1,159.9	1,132.6	1,154.9	1,228.8	1,254.5

[1] Includes deaths of nonresidents of the United States.

NOTE: For data years shown, the code numbers for cause of death are based on the then current *International Classification of Diseases*, which are described in Appendix II, tables IV and V.

SOURCES: National Center for Health Statistics: *Vital Statistics of the United States*, Vol. II, Mortality, Part A, 1950–86. Public Health Service. Washington. U.S. Government Printing Office; Data computed by the Division of Analysis from data compiled by the Division of Vital Statistics and from table 1.

Table 27. Death rates for malignant neoplasms of respiratory system, according to sex, race, and age: United States, selected years 1950–86

[Data are based on the National Vital Statistics System]

Sex, race, and age	1950[1]	1960[1]	1970	1980	1983	1984	1985	1986
	Deaths per 100,000 resident population							
All races								
All ages, age adjusted	12.8	19.2	28.4	36.4	37.9	38.4	38.8	39.0
All ages, crude	14.1	22.2	34.2	47.9	51.3	52.3	53.3	54.1
Under 1 year	0.1	0.2	0.1	0.2	0.2	0.3	0.1	0.1
1–4 years	0.1	0.1	0.1	0.1	0.1	0.1	0.0	0.0
5–14 years	0.1	0.0	0.0	0.0	0.1	0.1	0.0	0.0
15–24 years	0.2	0.1	0.2	0.1	0.1	0.1	0.1	0.1
25–34 years	0.9	1.1	1.0	0.8	0.7	0.7	0.8	0.7
35–44 years	5.1	7.3	11.6	9.6	8.9	8.2	8.1	7.9
45–54 years	22.9	32.0	46.2	56.5	54.6	53.9	52.8	51.7
55–64 years	55.2	81.5	116.2	144.3	151.8	156.1	158.4	157.8
65–74 years	69.3	117.2	174.6	243.1	258.7	262.7	268.0	271.7
75–84 years	69.3	102.9	175.1	251.4	278.3	286.4	294.5	303.9
85 years and over	64.0	79.1	121.8	184.5	191.6	199.3	202.0	214.9
White male								
All ages, age adjusted	21.6	34.6	49.9	58.0	58.0	58.4	58.2	58.0
All ages, crude	24.1	39.6	58.3	73.4	75.9	76.8	77.3	77.8
Under 1 year	0.2	0.1	0.2	0.2	0.3	0.3	–	0.1
1–4 years	0.1	0.0	0.1	0.0	0.1	0.0	0.0	0.0
5–14 years	0.1	0.0	0.0	0.0	0.1	0.1	0.0	0.0
15–24 years	0.3	0.2	0.2	0.2	0.2	0.2	0.2	0.2
25–34 years	1.2	1.6	1.4	0.9	0.7	0.8	0.7	0.9
35–44 years	7.9	10.4	15.4	11.2	10.0	9.1	9.4	8.5
45–54 years	39.1	53.0	67.6	74.3	68.7	67.8	65.2	63.7
55–64 years	95.9	149.8	199.3	215.0	215.2	220.0	221.7	221.3
65–74 years	119.4	225.1	344.8	418.4	420.7	421.3	419.1	417.0
75–84 years	109.1	191.9	360.7	516.1	550.1	556.5	562.6	570.7
85 years and over	102.7	133.9	243.8	391.5	435.9	446.8	459.1	477.5
Black male								
All ages, age adjusted	16.9	36.6	60.8	82.0	83.3	85.9	84.4	83.9
All ages, crude	14.3	31.1	51.2	70.8	72.6	75.5	74.5	74.6
Under 1 year	–	0.4	0.4	0.4	0.4	1.1	0.3	–
1–4 years		0.1	0.1	0.2	0.2	–	–	–
5–14 years	0.1	0.0	0.1	0.0	0.0	0.0	0.0	–
15–24 years	0.4	0.2	0.3	0.3	0.2	0.2	0.3	0.2
25–34 years	2.1	2.6	2.9	1.9	1.5	1.6	1.9	1.4
35–44 years	9.4	20.7	32.6	26.9	23.0	23.6	22.8	22.3
45–54 years	41.1	75.0	123.5	142.8	137.7	131.8	132.1	131.3
55–64 years	78.8	161.8	250.3	340.3	346.2	373.0	352.1	337.3
65–74 years	65.2	184.6	322.2	499.4	530.3	529.3	534.8	542.3
75–84 years	42.4	126.3	290.6	499.6	536.8	576.5	581.3	606.5
85 years and over		110.3	182.1	337.7	309.5	423.8	390.8	456.7
White female								
All ages, age adjusted	4.6	5.1	10.1	18.2	21.0	21.6	22.6	23.1
All ages, crude	5.4	6.4	13.1	26.5	31.5	32.8	34.6	35.9
Under 1 year	–	0.2	0.1	0.1	0.1	0.1	0.2	0.2
1–4 years	0.1	0.1	0.1	0.1	0.1	0.1	0.1	–
5–14 years	0.1	0.0	0.1	0.1	0.0	0.0	0.0	0.0
15–24 years	0.2	0.1	0.1	0.0	0.1	0.1	0.1	0.1
25–34 years	0.5	0.6	0.6	0.5	0.5	0.6	0.6	0.5
35–44 years	2.2	3.4	6.0	6.8	6.6	5.9	5.6	5.8
45–54 years	6.5	9.8	22.1	33.9	35.3	35.6	36.0	34.9
55–64 years	15.5	16.7	39.3	74.2	87.8	89.9	94.2	94.9
65–74 years	27.2	26.5	45.4	108.1	132.3	139.2	149.1	156.0
75–84 years	40.0	36.5	56.8	99.3	122.2	129.9	140.3	149.0
85 years and over	44.0	45.2	60.1	96.8	96.7	102.5	102.1	113.8
Black female								
All ages, age adjusted	4.1	5.5	10.9	19.5	22.0	21.4	22.5	23.3
All ages, crude	3.4	4.9	10.1	19.3	22.3	21.9	23.3	24.3
Under 1 year	–	–	–	0.4	–	–	0.4	–
1–4 years		0.1	0.1	–	0.1	0.1	–	–
5–14 years	–	0.1	–	0.0	0.0	0.0	0.0	–
15–24 years	0.3	–	0.1	0.1	–	0.1	0.1	0.1
25–34 years	1.2	0.8	0.5	0.8	0.7	0.6	1.0	0.6
35–44 years	2.7	3.4	10.5	7.9	8.7	7.7	7.7	8.6
45–54 years	8.8	12.8	25.3	46.4	45.4	42.4	40.7	42.8
55–64 years	15.3	20.7	36.4	83.8	97.2	98.4	105.6	102.4
65–74 years	16.4	20.7	49.3	91.7	110.6	106.1	118.9	130.9
75–84 years	19.2	33.1	52.6	81.1	108.5	112.3	108.6	123.5
85 years and over		44.7	54.0	90.5	96.9	86.5	112.2	102.1

[1]Includes deaths of nonresidents of the United States.

NOTE: For data years shown, the code numbers for cause of death are based on the then current *International Classification of Diseases*, which are described in Appendix II, tables IV and V.

SOURCES: National Center for Health Statistics: *Vital Statistics of the United States*, Vol. II, Mortality, Part A, 1950–86. Public Health Service. Washington. U.S. Government Printing Office; Data compiled by the Division of Analysis from data compiled by the Division of Vital Statistics and from table 1.

Table 28. Death rates for malignant neoplasm of breast for females, according to race and age: United States, selected years 1950–86

[Data are based on the National Vital Statistics System]

Race and age	1950[1]	1960[1]	1970	1980	1983	1984	1985	1986
	Deaths per 100,000 resident population							
All races								
All ages, age adjusted	22.2	22.3	23.1	22.7	22.7	23.2	23.2	23.1
All ages, crude	24.7	26.1	28.4	30.6	31.6	32.5	32.7	32.8
Under 25 years	0.1	0.1	0.0	0.0	0.1	0.0	0.0	0.0
25–34 years	3.8	3.8	3.9	3.3	3.2	3.3	3.0	3.1
35–44 years	20.8	20.2	20.4	17.9	16.6	16.5	17.5	18.3
45–54 years	46.9	51.4	52.6	48.1	45.9	45.8	46.7	45.4
55–64 years	70.4	70.8	77.6	80.5	81.9	82.0	83.6	80.9
65–74 years	94.0	90.0	93.8	101.1	104.9	108.0	107.7	109.9
75–84 years	139.8	129.9	127.4	126.4	130.9	136.2	137.7	136.2
85 years and over	195.5	191.9	157.1	169.3	175.1	180.0	175.9	180.0
White								
All ages, age adjusted	22.5	22.4	23.4	22.8	22.7	23.1	23.3	23.0
All ages, crude	25.7	27.2	29.9	32.3	33.3	34.2	34.6	34.6
Under 25 years	0.1	0.0	0.0	0.0	0.1	0.0	0.0	0.0
25–34 years	3.7	3.6	3.7	3.0	3.0	3.1	2.8	2.7
35–44 years	20.8	19.7	20.2	17.3	16.0	17.4	16.7	17.3
45–54 years	47.1	51.2	53.0	48.1	45.3	45.3	46.5	44.4
55–64 years	70.9	71.8	79.3	81.3	82.8	82.2	84.2	81.8
65–74 years	96.3	91.6	95.9	103.7	106.9	110.1	110.0	112.4
75–84 years	143.6	132.8	129.6	128.4	133.1	138.3	140.4	139.7
85 years and over	204.2	199.7	161.9	171.7	178.6	183.7	178.9	182.7
Black								
All ages, age adjusted	19.3	21.3	21.5	23.3	24.4	26.1	25.3	25.8
All ages, crude	16.4	18.7	19.7	22.9	24.4	26.3	25.6	26.2
Under 25 years	0.1	0.2	0.1	0.0	0.1	0.0	0.1	0.1
25–34 years	4.9	6.1	5.9	5.3	4.6	5.0	4.4	5.6
35–44 years	21.0	24.8	24.4	24.1	23.8	28.9	26.3	28.3
45–54 years	46.5	54.4	52.0	52.7	55.3	55.5	54.4	59.1
55–64 years	64.3	63.2	64.7	79.9	82.9	90.5	88.5	83.6
65–74 years	67.0	72.3	77.3	84.3	95.0	100.1	99.3	100.5
75–84 years	81.0	87.5	101.8	114.1	120.6	128.2	121.0	112.1
85 years and over		92.1	112.1	149.9	143.4	149.6	152.5	162.1

[1] Includes deaths of nonresidents of the United States.

NOTE: For data years shown, the code numbers for cause of death are based on the then current *International Classification of Diseases*, which are described in Appendix II, tables IV and V.

SOURCES: National Center for Health Statistics: *Vital Statistics of the United States*, Vol. II, Mortality, Part A, 1950–86. Public Health Service. Washington. U.S. Government Printing Office; Data computed by the Division of Analysis from data compiled by the Division of Vital Statistics and from table 1.

Table 29. Maternal mortality rates for complications of pregnancy, childbirth, and the puerperium, according to race and age: United States, selected years 1950–86

[Data are based on the National Vital Statistics System]

Race and age	1950[1]	1960[1]	1970	1980	1983	1984	1985	1986
				Deaths per 100,000 live births				
All races								
All ages, age adjusted	73.8	32.2	21.5	9.6	8.0	7.4	7.9	7.0
All ages, crude	83.3	37.1	21.5	9.2	8.0	7.8	7.8	7.2
Under 20 years	70.7	22.7	18.9	7.6	5.4	6.3	6.9	5.9
20–24 years	47.6	20.7	13.0	5.8	7.5	4.3	5.4	5.7
25–29 years	63.5	29.8	17.0	7.7	6.6	6.9	6.4	5.8
30–34 years	107.7	50.3	31.6	13.6	9.1	11.5	8.9	7.8
35 years and over[2]	222.0	104.3	81.9	36.3	20.7	21.9	25.0	21.4
White								
All ages, age adjusted	53.2	22.4	14.5	7.0	5.9	5.0	5.1	4.7
All ages, crude	61.1	26.0	14.4	6.7	5.9	5.4	5.2	4.9
Under 20 years	44.9	14.8	13.9	5.9	*4.4	*4.3	*4.3	*4.1
20–24 years	35.7	15.3	8.4	4.3	4.9	*2.0	3.4	3.7
25–29 years	45.0	20.3	11.2	5.5	5.2	5.7	4.7	3.6
30–34 years	75.9	34.3	18.8	9.4	6.0	7.8	5.2	5.2
35 years and over[2]	174.1	73.9	59.6	25.8	17.3	16.0	17.8	16.1
Black								
All ages, age adjusted	- - -	92.1	64.2	24.0	19.3	20.9	22.2	19.3
All ages, crude	- - -	103.6	59.8	21.5	18.3	19.7	20.4	18.8
Under 20 years	- - -	54.8	31.8	12.8	*7.0	*11.4	*12.1	*10.6
20–24 years	- - -	56.9	41.0	13.4	20.2	15.2	14.0	13.9
25–29 years	- - -	92.8	63.8	21.4	16.0	15.6	18.4	19.3
30–34 years	- - -	150.6	115.6	41.9	31.1	37.9	35.8	29.0
35 years and over[2]	- - -	299.5	204.7	96.5	*41.4	*67.6	72.6	*58.6

[1]Includes deaths of nonresidents of the United States.

[2]Rates computed by relating deaths of women 35 years and over to live births to women 35–49 years.

*Based on fewer than 20 deaths.

NOTE: For data years shown, the code numbers for cause of death are based on the then current *International Classification of Diseases*, which are described in Appendix II, tables IV and V.

SOURCES: National Center for Health Statistics: *Vital Statistics of the United States*, Vol. II, Mortality, Part A, 1950–86. Public Health Service. Washington. U.S. Government Printing Office; *Vital Statistics of the United States*, Vol. I, Natality, 1950–86. Public Health Service. Washington. U.S. Government Printing Office; Data computed by the Division of Analysis from data compiled by the Division of Vital Statistics; U.S. Bureau of the Census: Population estimates and projections. *Current Population Reports*. Series P-25, No. 490. Washington. U.S. Government Printing Office, May 1973.

Table 30. Death rates for motor vehicle accidents, according to sex, race, and age: United States, selected years 1950–86

[Data are based on the National Vital Statistics System]

Sex, race, and age	1950[1]	1960[1]	1970	1980	1983	1984	1985	1986
	Deaths per 100,000 resident population							
All races								
All ages, age adjusted	23.3	22.5	27.4	22.9	18.5	19.1	18.8	19.4
All ages, crude	23.1	21.3	26.9	23.5	19.0	19.6	19.2	19.9
Under 1 year	8.4	8.1	9.8	7.0	5.2	4.4	4.8	4.9
1–4 years	11.5	10.0	11.5	9.2	7.5	6.9	7.1	7.0
5–14 years	8.8	7.9	10.2	7.9	6.6	6.7	6.8	6.9
15–24 years	34.4	38.0	47.2	44.8	35.1	36.7	36.1	39.0
25–34 years	24.6	24.3	30.9	29.1	23.4	23.8	22.8	24.2
35–44 years	20.3	19.3	24.9	20.9	16.8	17.1	17.1	16.6
45–54 years	22.2	21.4	25.5	18.6	15.3	15.4	15.2	15.1
55–64 years	29.2	25.1	27.9	17.4	14.7	15.7	15.5	15.1
65–74 years	38.8	31.4	32.8	19.2	17.1	18.0	17.7	17.9
75–84 years	52.7	41.8	43.5	28.1	26.0	28.2	27.6	28.8
85 years and over	45.1	37.9	36.6	27.6	25.0	25.0	26.1	25.3
White male								
All ages, age adjusted	35.9	34.0	40.1	34.8	27.8	28.4	27.6	28.7
All ages, crude	35.1	31.5	39.1	35.9	28.5	29.1	28.2	29.2
Under 1 year	9.1	8.8	9.1	7.0	5.7	3.9	4.5	4.1
1–4 years	13.2	11.3	12.2	9.5	8.3	7.5	7.6	7.0
5–14 years	12.0	10.3	12.6	9.8	8.4	8.4	8.5	8.7
15–24 years	58.3	62.7	75.2	73.8	57.0	59.1	57.4	62.6
25–34 years	39.1	38.6	47.0	46.6	37.0	37.3	35.5	37.3
35–44 years	30.9	28.4	35.2	30.7	24.3	24.3	24.1	23.7
45–54 years	31.6	29.7	34.6	26.3	21.2	21.7	20.9	20.8
55–64 years	41.9	34.4	39.0	23.9	19.9	20.9	20.6	19.9
65–74 years	59.1	45.5	46.2	25.8	22.5	24.0	21.7	22.4
75–84 years	86.4	66.8	69.2	43.6	39.8	41.8	41.2	42.9
85 years and over	79.3	61.9	72.0	57.3	54.7	52.6	56.4	51.6
Black male								
All ages, age adjusted	39.8	38.2	50.1	32.9	26.4	27.2	27.7	29.2
All ages, crude	37.2	33.1	44.2	31.1	25.2	26.4	26.7	28.6
Under 1 year	9.0	6.8	10.6	7.8	3.6	5.7	5.9	8.0
1–4 years		12.7	16.9	13.7	10.9	9.8	10.7	10.7
5–14 years	9.7	10.4	16.1	10.5	8.5	8.7	8.9	9.6
15–24 years	41.6	46.4	58.1	34.9	28.3	31.9	32.1	35.3
25–34 years	57.4	51.0	70.4	44.9	35.9	36.8	37.2	41.7
35–44 years	45.9	43.6	59.5	41.2	33.6	33.8	35.4	35.1
45–54 years	49.9	48.1	61.4	39.1	32.4	28.5	29.9	31.4
55–64 years	58.8	47.3	62.1	40.3	31.2	31.5	34.3	31.9
65–74 years	48.5	46.1	54.9	41.8	29.6	35.5	30.0	27.2
75–84 years	61.8	51.8	51.5	46.5	41.7	45.0	42.2	53.1
85 years and over		58.6	53.8	34.0	28.6	57.1	36.9	62.7
White female								
All ages, age adjusted	10.6	11.1	14.4	12.3	10.3	10.9	10.8	11.0
All ages, crude	10.9	11.2	14.8	12.8	10.8	11.5	11.4	11.5
Under 1 year	7.8	7.5	10.2	7.1	4.8	4.4	3.9	4.6
1–4 years	10.1	8.3	9.6	7.7	6.0	5.4	5.7	6.0
5–14 years	5.6	5.3	6.9	5.7	4.7	5.1	5.2	4.9
15–24 years	12.6	15.6	22.7	23.0	18.8	20.1	20.1	21.5
25–34 years	9.0	9.0	12.7	12.2	10.7	11.0	10.0	10.8
35–44 years	8.1	8.9	12.3	10.6	8.8	9.4	9.4	8.4
45–54 years	10.8	11.4	14.3	10.2	8.5	8.9	8.9	8.5
55–64 years	15.0	15.3	16.1	10.5	9.3	10.3	9.9	9.6
65–74 years	20.9	19.3	22.1	13.4	12.6	13.0	14.3	14.4
75–84 years	25.4	23.8	28.1	19.0	17.9	20.6	19.9	20.5
85 years and over	22.3	22.2	18.9	15.3	14.0	13.8	15.1	14.7
Black female								
All ages, age adjusted	10.3	10.0	13.8	8.4	7.5	7.6	8.2	8.5
All ages, crude	10.2	9.7	13.4	8.3	7.6	7.8	8.3	8.5
Under 1 year	7.0	8.1	11.9	5.3	5.1	5.1	7.8	5.3
1–4 years		8.8	12.6	9.5	8.0	6.9	6.8	6.9
5–14 years	6.2	5.9	9.3	5.2	4.3	4.4	4.3	4.8
15–24 years	11.5	9.9	13.4	8.0	8.6	8.4	9.1	9.1
25–34 years	10.7	9.8	13.3	10.6	7.4	9.0	9.2	10.3
35–44 years	11.1	11.0	16.1	8.3	7.3	8.6	9.1	8.7
45–54 years	10.6	11.8	16.4	9.1	8.7	6.4	8.2	8.7
55–64 years	14.0	14.0	17.1	9.3	8.1	8.5	9.5	10.9
65–74 years	12.7	14.2	16.3	8.5	9.6	9.7	9.6	9.7
75–84 years	17.6	8.8	14.3	11.1	15.1	13.7	15.0	10.0
85 years and over		21.1	17.5	12.3	7.8	9.8	9.4	11.0

[1]Includes deaths of nonresidents of the United States.

NOTE: For data years shown, the code numbers for cause of death are based on the then current *International Classification of Diseases*, which are described in Appendix II, tables IV and V.

SOURCES: National Center for Health Statistics: *Vital Statistics of the United States*, Vol. II, Mortality, Part A, 1950–86. Public Health Service. Washington. U.S. Government Printing Office; Data computed by the Division of Analysis from data compiled by the Division of Vital Statistics and from table 1.

Table 31. Death rates for homicide and legal intervention, according to sex, race, and age: United States, selected years 1950–86

[Data are based on the National Vital Statistics System]

Sex, race, and age	1950[1]	1960[1]	1970	1980	1983	1984	1985	1986
	Deaths per 100,000 resident population							
All races								
All ages, age adjusted	5.4	5.2	9.1	10.8	8.6	8.4	8.3	9.0
All ages, crude	5.3	4.7	8.3	10.7	8.6	8.4	8.3	9.0
Under 1 year	4.4	4.8	4.3	5.9	5.3	6.5	5.3	7.4
1–4 years	0.6	0.7	1.9	2.5	2.3	2.4	2.4	2.7
5–14 years	0.5	0.5	0.9	1.2	1.0	1.3	1.2	1.1
15–24 years	6.3	5.9	11.7	15.6	12.4	12.0	12.1	14.2
25–34 years	9.9	9.7	16.6	19.6	15.4	14.7	14.7	16.1
35–44 years	8.8	8.1	13.7	15.1	11.8	11.3	11.3	11.4
45–54 years	6.1	6.2	10.1	11.1	8.7	8.5	8.1	8.3
55–64 years	4.0	4.2	7.1	7.0	6.1	5.8	5.7	5.4
65–74 years	3.2	2.8	5.0	5.7	4.3	4.2	4.3	4.4
75–84 years	2.6	2.4	4.0	5.2	4.9	4.4	4.3	4.6
85 years and over	2.3	2.4	4.5	5.3	5.0	4.3	4.1	4.7
White male								
All ages, age adjusted	3.9	3.9	7.3	10.9	8.4	8.2	8.1	8.4
All ages, crude	3.9	3.6	6.8	10.9	8.6	8.3	8.2	8.6
Under 1 year	4.3	3.8	2.9	4.3	3.3	4.9	3.7	5.4
1–4 years	0.4	0.6	1.4	2.0	1.7	1.9	1.9	1.9
5–14 years	0.4	0.4	0.5	0.9	0.9	0.9	1.1	0.9
15–24 years	3.7	4.4	7.9	15.5	11.5	11.1	11.2	12.5
25–34 years	5.4	6.2	13.0	18.9	14.9	14.1	13.9	14.6
35–44 years	6.4	5.5	11.0	15.5	12.4	11.8	11.5	11.6
45–54 years	5.5	5.0	9.0	11.9	9.1	9.4	8.6	8.6
55–64 years	4.4	4.3	7.7	7.8	6.4	6.3	6.3	6.0
65–74 years	4.1	3.4	5.6	6.9	4.6	4.2	4.5	4.3
75–84 years	3.5	2.7	5.1	6.3	4.6	4.2	4.5	4.6
85 years and over	1.8	2.7	7.0	6.4	5.6	5.3	3.9	4.4
Black male								
All ages, age adjusted	51.1	44.9	82.1	71.9	53.8	50.8	49.9	55.9
All ages, crude	47.3	36.6	67.5	66.6	51.4	48.7	48.4	55.0
Under 1 year	1.8	10.3	14.3	18.6	14.0	20.1	16.0	22.5
1–4 years		1.7	5.1	7.2	7.2	5.0	6.5	9.3
5–14 years	1.8	1.4	4.2	2.9	3.1	3.2	3.2	3.2
15–24 years	58.9	46.4	102.5	84.3	66.8	61.5	66.1	79.2
25–34 years	110.5	92.0	158.5	145.1	102.0	96.2	94.3	108.0
35–44 years	83.7	77.5	126.2	110.3	82.0	78.1	76.3	79.4
45–54 years	54.6	54.8	100.6	83.8	57.8	57.1	51.1	56.3
55–64 years	35.7	31.8	59.8	55.6	46.7	40.6	37.8	35.4
65–74 years	18.7	19.1	40.6	33.9	28.1	30.3	27.6	30.0
75–84 years	11.5	16.1	18.9	27.6	32.4	28.3	21.5	27.9
85 years and over		10.3	23.1	17.0	27.0	28.6	16.9	25.4
White female								
All ages, age adjusted	1.4	1.5	2.2	3.2	2.8	2.9	2.9	2.9
All ages, crude	1.4	1.4	2.1	3.2	2.8	2.9	2.9	3.0
Under 1 year	3.9	3.5	2.9	4.3	3.7	4.0	4.3	5.1
1–4 years	0.6	0.5	1.2	1.5	1.2	1.7	1.6	1.4
5–14 years	0.4	0.3	0.5	1.0	0.7	0.9	0.8	0.8
15–24 years	1.3	1.5	2.7	4.7	3.7	4.3	3.6	4.3
25–34 years	1.9	2.0	3.4	4.3	4.1	3.9	4.4	4.4
35–44 years	2.2	2.2	3.2	4.1	3.5	3.4	3.6	3.5
45–54 years	1.6	1.9	2.2	3.0	2.9	2.7	2.9	2.8
55–64 years	1.3	1.5	2.0	2.1	2.2	2.2	2.3	1.9
65–74 years	1.1	1.1	1.7	2.5	2.0	1.9	2.2	2.2
75–84 years	1.2	1.2	2.5	3.3	3.1	2.9	3.1	3.1
85 years and over	1.9	1.5	2.0	4.0	3.8	2.6	3.2	3.3
Black female								
All ages, age adjusted	11.7	11.8	15.0	13.7	11.2	11.0	10.8	11.8
All ages, crude	11.5	10.4	13.2	13.5	11.3	11.2	11.0	12.1
Under 1 year	2.6	13.8	10.7	12.8	15.3	16.4	10.3	17.0
1–4 years		1.7	6.3	6.4	6.3	6.7	6.3	6.6
5–14 years	1.2	1.0	2.0	2.2	1.4	3.1	2.0	2.3
15–24 years	16.5	11.9	17.7	18.4	15.7	14.8	14.2	16.2
25–34 years	26.6	24.9	25.6	25.8	19.9	19.3	19.8	21.9
35–44 years	17.8	20.5	25.1	17.7	14.8	14.4	14.8	14.8
45–54 years	8.5	12.7	17.5	12.5	9.5	7.5	9.0	8.5
55–64 years	3.6	6.8	8.1	8.9	6.3	6.7	6.4	6.8
65–74 years	3.4	3.3	7.7	8.6	7.0	6.8	7.2	8.7
75–84 years	4.0	2.5	5.7	6.7	11.3	9.8	7.6	8.6
85 years and over		2.6	11.1	8.5	8.5	7.5	11.5	13.1

[1] Includes deaths of nonresidents of the United States.

NOTE: For data years shown, the code numbers for cause of death are based on the then current *International Classification of Diseases*, which are described in Appendix II, tables IV and V.

SOURCES: National Center for Health Statistics: *Vital Statistics of the United States*, Vol. II, Mortality, Part A, 1950–86. Public Health Service. Washington. U.S. Government Printing Office; Data compiled by the Division of Analysis from data compiled by the Division of Vital Statistics and from table 1.

Table 32. Death rates for suicide, according to sex, race, and age: United States, selected years 1950–86

[Data are based on the National Vital Statistics System]

Sex, race, and age	1950[1]	1960[1]	1970	1980	1983	1984	1985	1986
	Deaths per 100,000 resident population							
All races								
All ages, age adjusted	11.0	10.6	11.8	11.4	11.4	11.6	11.5	11.9
All ages, crude	11.4	10.6	11.6	11.9	12.1	12.4	12.3	12.8
Under 1 year	–	. . .	. . .	. . .	. . .	. . .	. . .	. . .
1–4 years	–	. . .	. . .	. . .	. . .	. . .	. . .	. . .
5–14 years	0.2	0.3	0.3	0.4	0.6	0.7	0.8	0.8
15–24 years	4.5	5.2	8.8	12.3	11.9	12.5	12.9	13.1
25–34 years	9.1	10.0	14.1	16.0	15.8	15.5	15.2	15.7
35–44 years	14.3	14.2	16.9	15.4	14.6	15.1	14.6	15.2
45–54 years	20.9	20.7	20.0	15.9	16.2	16.2	15.6	16.4
55–64 years	27.0	23.7	21.4	15.9	16.5	17.3	16.7	17.0
65–74 years	29.3	23.0	20.8	16.9	17.7	18.8	18.5	19.7
75–84 years	31.1	27.9	21.2	19.1	22.3	22.0	24.1	25.2
85 years and over	28.8	26.0	20.4	19.2	19.0	18.4	19.1	20.8
White male								
All ages, age adjusted	18.1	17.5	18.2	18.9	19.3	19.7	19.9	20.5
All ages, crude	19.0	17.6	18.0	19.9	20.6	21.3	21.5	22.3
Under 1 year	–	. . .	. . .	. . .	. . .	. . .	. . .	. . .
1–4 years	–	. . .	. . .	. . .	. . .	. . .	. . .	. . .
5–14 years	0.3	0.5	0.5	0.7	0.9	1.1	1.3	1.2
15–24 years	6.6	8.6	13.9	21.4	20.6	22.0	22.7	23.6
25–34 years	13.8	14.9	19.9	25.6	26.2	25.8	25.4	26.4
35–44 years	22.4	21.9	23.3	23.5	23.2	23.7	23.5	23.9
45–54 years	34.1	33.7	29.5	24.2	25.5	25.3	25.1	26.3
55–64 years	45.9	40.2	35.0	25.8	27.4	28.8	28.6	28.7
65–74 years	53.2	42.0	38.7	32.5	33.2	35.6	35.3	37.6
75–84 years	61.9	55.7	45.5	45.5	52.5	52.0	57.1	58.9
85 years and over	61.9	61.3	50.3	52.8	56.8	55.8	60.3	66.3
Black male								
All ages, age adjusted	7.0	7.8	9.9	11.1	10.5	11.2	11.3	11.5
All ages, crude	6.3	6.4	8.0	10.3	9.9	10.6	10.8	11.1
Under 1 year	–	. . .	. . .	. . .	. . .	. . .	. . .	. . .
1–4 years	–	. . .	. . .	. . .	. . .	. . .	. . .	. . .
5–14 years	–	0.1	0.1	0.3	0.5	0.5	0.6	0.8
15–24 years	4.9	4.1	10.5	12.3	11.5	11.2	13.3	11.5
25–34 years	9.3	12.4	19.2	21.8	19.1	20.7	19.6	21.3
35–44 years	10.4	12.8	12.6	15.6	14.0	16.5	14.9	17.5
45–54 years	10.4	10.8	13.8	12.0	12.1	11.6	13.5	12.8
55–64 years	16.5	16.2	10.6	11.7	11.6	13.4	11.5	9.9
65–74 years	10.0	11.3	8.7	11.1	13.6	13.8	15.8	16.1
75–84 years	6.2	6.6	8.9	10.5	15.8	15.1	15.6	16.0
85 years and over		6.9	10.3	18.9	12.7	11.1	7.7	17.9
White female								
All ages, age adjusted	5.3	5.3	7.2	5.7	5.6	5.6	5.3	5.4
All ages, crude	5.5	5.3	7.1	5.9	5.9	5.9	5.6	5.9
Under 1 year	–	. . .	. . .	. . .	. . .	. . .	. . .	. . .
1–4 years	–	. . .	. . .	. . .	. . .	. . .	. . .	. . .
5–14 years	0.1	0.1	0.1	0.2	0.3	0.3	0.5	0.3
15–24 years	2.7	2.3	4.2	4.6	4.6	4.7	4.7	4.7
25–34 years	5.2	5.8	9.0	7.5	7.2	6.6	6.4	6.2
35–44 years	8.2	8.1	13.0	9.1	8.2	8.4	7.7	8.3
45–54 years	10.5	10.9	13.5	10.2	9.9	10.0	9.0	9.6
55–64 years	10.7	10.9	12.3	9.1	9.1	9.1	8.4	9.0
65–74 years	10.6	8.8	9.6	7.0	7.9	7.8	7.3	7.7
75–84 years	8.4	9.2	7.2	5.7	6.6	6.8	7.0	8.0
85 years and over	8.9	6.1	6.1	5.8	5.3	5.1	4.7	5.0
Black female								
All ages, age adjusted	1.7	1.9	2.9	2.4	2.1	2.3	2.1	2.4
All ages, crude	1.5	1.6	2.6	2.2	2.0	2.2	2.1	2.3
Under 1 year	–	. . .	. . .	. . .	. . .	. . .	. . .	. . .
1–4 years	–	. . .	. . .	. . .	. . .	. . .	. . .	. . .
5–14 years	–	0.0	0.2	0.1	0.6	0.2	0.2	0.2
15–24 years	1.8	1.3	3.8	2.3	2.7	2.4	2.0	2.3
25–34 years	2.6	3.0	5.7	4.1	2.9	3.5	3.0	3.8
35–44 years	2.0	3.0	3.7	4.6	3.5	3.2	3.6	2.8
45–54 years	3.5	3.1	3.7	2.8	3.0	3.5	3.2	3.2
55–64 years	1.1	3.0	2.0	2.3	1.7	3.1	2.2	4.2
65–74 years	1.9	2.3	2.9	1.7	1.3	2.5	2.0	2.8
75–84 years	2.4	1.3	1.7	1.4	1.3	0.5	4.5	2.6
85 years and over		–	3.2	–	2.3	0.8	1.4	–

[1] Includes deaths of nonresidents of the United States.

NOTE: For data years shown, the code numbers for cause of death are based on the then current *International Classification of Diseases*, which are described in Appendix II, tables IV and V.

SOURCES: National Center for Health Statistics: *Vital Statistics of the United States*, Vol. II, Mortality, Part A, 1950–86. Public Health Service. Washington. U.S. Government Printing Office; Data compiled by the Division of Analysis from data compiled by the Division of Vital Statistics and from table 1.

Table 33. Deaths for selected occupational diseases for males, according to age: United States, selected years 1970–86

[Data are based on the National Vital Statistics System]

Age and cause of death	1970	1975	1978	1979	1980	1981	1982	1983	1984	1985	1986
	Number of deaths[1]										
25 years and over											
Malignant neoplasm of peritoneum and pleura (mesothelioma)	602	591	557	559	552	556	576	584	584	571	564
Coalworkers' pneumoconiosis	1,155	973	840	918	977	1,053	954	926	923	947	882
Asbestosis	25	43	64	86	96	98	99	128	131	130	160
Silicosis	351	243	162	220	202	165	176	149	160	138	135
25–64 years											
Malignant neoplasm of peritoneum and pleura (mesothelioma)	308	280	254	246	241	229	234	211	211	210	200
Coalworkers' pneumoconiosis	294	188	116	130	136	116	116	88	97	89	71
Asbestosis	17	22	31	29	30	21	26	30	25	29	37
Silicosis	90	64	50	51	49	44	42	37	34	30	22
65 years and over											
Malignant neoplasm of peritoneum and pleura (mesothelioma)	294	311	303	313	311	327	342	373	373	361	384
Coalworkers' pneumoconiosis	861	785	724	788	841	937	838	838	826	858	811
Asbestosis	8	21	33	57	66	77	73	98	106	101	143
Silicosis	261	179	112	169	153	121	134	112	126	108	113

[1]This table classifies deaths according to underlying cause. Multiple cause of death data from the Vital Statistics System can be used to identify additional deaths for which occupational disease is a nonunderlying cause of death rather than the underlying cause. In 1985, among men 25 years and over, there were an additional 102 deaths with mesothelioma as a nonunderlying cause. Of these, 24 had heart disease and 54 had malignant neoplasms as the underlying cause of death. In 1985, there were an additional 1,852 deaths with coalworkers' pneumoconiosis as a nonunderlying cause, of which 751 had heart disease and 424 had malignant neoplasms as the underlying cause of death. In 1985, for an additional 382 deaths, asbestosis was listed as a nonunderlying cause, of which 99 had heart disease and 191 had malignant neoplasms as the underlying cause of death. In 1985, an additional 187 deaths mentioned silicosis as a nonunderlying cause, of which 59 had heart disease and 34 had malignant neoplasms as the underlying cause of death.

NOTE: Selection of occupational diseases based on definitions in D. Rutstein et al.: Sentinel health events (occupational): A basis for physician recognition and public health surveillance, *Am. J. Public Health* 73(9):1054–1062, Sept. 1983. For data years shown, the code numbers for cause of death are based on the then current *International Classification of Diseases*, which are described in Appendix II, tables IV and V. Changes in number of deaths from 1978 to 1979 may be affected by changes in coding from the *Eighth Revision* to the *Ninth Revision*.

SOURCES: Data computed by the National Institute for Occupational Safety and Health from data compiled by the Division of Vital Statistics, National Center for Health Statistics; Data computed by the Division of Analysis from data compiled by the Division of Vital Statistics.

Table 34. Provisional death rates for all causes, according to race, sex, and age: United States, 1985–87

[Data are based on a 10-percent sample of death certificates from the National Vital Statistics System]

Sex and age	All races			White			Black		
	1985	1986	1987	1985	1986	1987	1985	1986	1987
	Deaths per 100,000 resident population								
Both sexes									
All ages, age adjusted	545.9	540.2	536.2	523.2	518.2	514.0	779.0	768.7	767.1
All ages, crude	874.8	870.8	874.0	897.2	895.4	900.2	841.4	842.1	843.6
Under 1 year	1,055.2	1,036.7	1,006.5	930.0	877.3	836.9	1,817.1	1,952.1	2,001.7
1–4 years	51.1	50.8	51.6	46.1	45.7	49.1	79.3	80.2	68.1
5–14 years	27.9	26.4	25.6	26.1	24.5	24.2	37.3	36.9	35.7
15–24 years	94.8	102.6	101.6	91.2	99.6	98.3	118.1	124.0	126.6
25–34 years	122.3	130.2	131.4	107.5	114.5	116.0	232.3	252.4	248.7
35–44 years	210.5	212.5	211.8	184.0	187.0	183.2	452.4	440.7	467.2
45–54 years	516.3	504.6	498.9	469.6	460.2	454.2	953.0	923.7	913.3
55–64 years	1,284.7	1,259.0	1,246.8	1,219.1	1,201.9	1,187.9	2,029.8	1,934.9	1,922.3
65–74 years	2,839.1	2,787.8	2,763.6	2,776.5	2,734.8	2,711.3	3,730.0	3,634.5	3,609.4
75–84 years	6,411.3	6,316.4	6,266.1	6,385.2	6,287.0	6,243.7	7,284.4	7,209.8	7,209.9
85 years and over	15,486.3	15,291.1	15,405.7	15,787.0	15,503.3	15,698.5	12,843.9	13,563.4	12,868.8
Male									
All ages, age adjusted	717.4	707.1	698.6	689.5	680.7	671.0	1,028.9	1,003.4	1,005.4
All ages, crude	945.1	937.8	935.1	960.1	955.3	951.6	979.0	964.0	973.1
Under 1 year	1,178.0	1,156.7	1,122.7	1,046.7	989.7	938.7	2,000.0	2,140.4	2,218.0
1–4 years	56.7	56.1	58.4	52.6	51.0	54.2	80.0	84.0	85.1
5–14 years	33.3	32.0	31.8	31.6	29.9	30.1	43.2	44.2	45.6
15–24 years	141.2	151.5	150.5	135.0	146.3	145.3	184.8	189.9	194.9
25–34 years	178.7	189.9	189.1	157.5	167.3	166.7	348.5	379.0	370.3
35–44 years	285.5	286.7	290.4	247.2	250.8	251.1	662.7	635.9	673.5
45–54 years	670.3	666.8	638.0	608.0	607.4	577.7	1,315.7	1,282.1	1,244.4
55–64 years	1,686.9	1,647.9	1,625.8	1,609.8	1,579.8	1,554.7	2,619.8	2,499.5	2,473.5
65–74 years	3,788.4	3,660.4	3,635.7	3,723.1	3,615.5	3,585.7	4,846.5	4,561.7	4,592.0
75–84 years	8,514.3	8,296.8	8,206.1	8,517.0	8,304.9	8,200.1	9,289.1	9,103.4	9,238.8
85 years and over	18,210.6	18,167.9	18,037.2	18,637.4	18,536.5	18,456.4	15,353.8	15,507.5	14,956.5
Female									
All ages, age adjusted	408.3	405.4	404.5	390.0	387.0	386.9	584.6	585.0	579.9
All ages, crude	804.9	807.2	815.9	837.1	838.3	851.0	717.6	732.3	726.7
Under 1 year	927.1	911.5	883.8	806.8	758.2	729.7	1,643.9	1,759.9	1,780.9
1–4 years	45.1	45.2	44.4	39.1	40.2	43.7	78.5	76.2	50.5
5–14 years	22.2	20.6	19.1	20.3	18.8	18.1	31.3	29.3	25.6
15–24 years	47.5	52.7	51.7	46.3	51.6	50.0	53.7	59.9	64.0
25–34 years	65.9	70.4	73.6	56.6	60.6	64.2	129.4	139.7	140.1
35–44 years	137.7	140.4	135.4	121.5	123.7	115.7	277.0	277.5	295.0
45–54 years	371.2	351.5	367.3	336.7	318.6	335.0	658.4	633.7	644.4
55–64 years	927.8	913.7	909.6	868.8	862.8	857.8	1,545.5	1,471.4	1,465.6
65–74 years	2,095.1	2,098.3	2,070.4	2,030.7	2,035.6	2,012.4	2,907.7	2,955.7	2,879.4
75–84 years	5,162.2	5,132.7	5,102.4	5,128.0	5,087.4	5,075.9	6,059.7	6,060.5	5,979.6
85 years and over	14,389.8	14,154.2	14,376.5	14,681.7	14,327.7	14,641.8	11,678.6	12,671.2	11,921.1

NOTE: Includes deaths of nonresidents of the United States.

SOURCES: National Center for Health Statistics: Annual summary of births, marriages, divorces, and deaths, United States, 1985. *Monthly Vital Statistics Report.* Vol. 34, No. 13. DHHS Pub. No. (PHS) 86-1120. Sept. 19, 1986; Annual summary of births, marriages, divorces, and deaths, United States, 1987. *Monthly Vital Statistics Report.* Vol. 36, No. 13. DHHS Pub. No. (PHS) 88-1120. July 29, 1988. Public Health Service. Hyattsville, Md.

Table 35. Provisional age-adjusted death rates for selected causes of death: United States, 1985–87

[Data are based on a 10-percent sample of death certificates from the National Vital Statistics System]

Cause of death	1985	1986	1987
	Deaths per 100,000 resident population		
All causes	545.9	540.2	536.2
Diseases of heart	181.7	175.4	169.9
Cerebrovascular diseases	32.3	30.4	30.1
Malignant neoplasms	132.5	132.5	133.1
Respiratory system	38.3	38.3	39.3
Breast[1]	23.2	23.4	23.0
Chronic obstructive pulmonary diseases	18.6	18.5	18.7
Pneumonia and influenza	13.2	13.6	13.2
Chronic liver disease and cirrhosis	9.6	9.2	9.0
Diabetes mellitus	10.1	9.4	9.6
Accidents and adverse effects	34.3	35.5	34.6
Motor vehicle accidents	18.3	19.8	19.7
Suicide	11.2	12.0	11.7
Homicide and legal intervention	8.1	8.8	8.4

[1]Female only.

NOTES: Includes deaths of nonresidents of the United States. Code numbers for cause of death are based on the *International Classification of Diseases, Ninth Revision*, described in Appendix II, table V.

SOURCES: National Center for Health Statistics: Annual summary of births, marriages, divorces, and deaths, United States, 1985. *Monthly Vital Statistics Report.* Vol. 34, No. 13. DHHS Pub. No. (PHS) 86-1120. Sept. 19, 1986; Annual summary of births, marriages, divorces, and deaths, United States, 1986. *Monthly Vital Statistics Report.* Vol. 35, No. 13. DHHS Pub. No. (PHS) 87-1120. Aug. 24, 1987; Annual summary of births, marriages, divorces, and deaths, United States, 1987. *Monthly Vital Statistics Report.* Vol. 36, No. 13. DHHS Pub. No. (PHS) 88-1120. July 29, 1988. Public Health Service. Hyattsville, Md.

Table 38. Provisional death rates for the 3 leading causes of death, according to age: United States, 1985–87

[Data are based on a 10-percent sample of death certificates from the National Vital Statistics System]

Cause of death and age	1985	1986	1987
	Deaths per 100,000 resident population		
Diseases of heart			
All ages	325.0	318.7	313.4
Under 1 year	28.1	29.2	23.9
1–14 years	1.3	1.3	1.3
15–24 years	2.5	2.4	2.9
25–34 years	8.0	7.6	7.5
35–44 years	40.2	36.9	34.4
45–54 years	155.5	142.8	140.7
55–64 years	437.4	430.9	408.9
65–74 years	1,087.4	1,047.6	1,019.5
75–84 years	2,727.0	2,649.2	2,556.3
85 years and over	7,333.6	7,169.2	7,122.1
Malignant neoplasms			
All ages	191.7	193.3	196.1
Under 1 year	4.3	1.6	3.7
1–14 years	3.8	3.6	3.7
15–24 years	4.8	5.4	5.1
25–34 years	12.7	12.2	12.5
35–44 years	46.0	46.3	44.4
45–54 years	165.4	164.1	164.5
55–64 years	448.2	447.1	448.5
65–74 years	837.8	841.0	845.8
75–84 years	1,261.9	1,261.4	1,262.8
85 years and over	1,569.4	1,602.3	1,631.7
Cerebrovascular diseases			
All ages	64.0	61.3	61.3
Under 1 year	2.9	1.3	2.4
1–14 years	0.2	0.2	0.2
15–24 years	0.7	0.6	0.9
25–34 years	2.4	2.1	2.2
35–44 years	7.2	7.0	6.6
45–54 years	21.8	19.7	20.8
55–64 years	55.3	51.0	51.8
65–74 years	171.7	162.4	153.4
75–84 years	592.4	566.2	563.0
85 years and over	1,849.8	1,750.0	1,734.2

NOTES: Includes deaths of nonresidents of the United States. Code numbers for cause of death are based on the *International Classification of Diseases, Ninth Revision*, described in Appendix II, table V.

SOURCES: National Center for Health Statistics: Annual summary of births, marriages, divorces, and deaths, United States, 1986. *Monthly Vital Statistics Report.* Vol. 35, No. 13. DHHS Pub. No. (PHS) 87-1120. Aug. 24, 1987; Annual summary of births, marriages, divorces, and deaths, United States, 1987. *Monthly Vital Statistics Report.* Vol. 36, No. 13. DHHS Pub. No. (PHS) 88-1120. July 29, 1988. Public Health Service. Hyattsville, Md.

Table 37. Progress toward 1990 health promotion goals: 1977–86

1990 goals	1977	1978	1979	1980	1982	1983	1984	1985	1986	1990 goal
Infants (under 1 year)					Deaths per 1,000 live births					
To continue to improve infant health, and by 1990, to reduce infant mortality by at least 35 percent to fewer than 9 deaths per 1,000 live births	14.1	13.8	13.1	12.6	11.5	11.2	10.8	10.6	10.4	9
Children (1–14 years)					Deaths per 100,000 population					
To improve child health, foster optimal childhood development, and by 1990, reduce deaths among children ages 1 to 14 years by at least 20 percent to fewer than 34 per 100,000	42.3	42.1	40.1	38.5	36.7	35.3	34.1	33.8	33.7	34
Adolescents and young adults (15–24 years)										
To improve the health and health habits of adolescents and young adults, and by 1990, to reduce deaths among people ages 15 to 24 by at least 20 percent to fewer than 93 per 100,000	114.8	115.0	114.8	115.4	101.0	96.0	96.8	95.9	102.3	92
Adults (25–64 years)										
To improve the health of adults, and by 1990, to reduce deaths among people ages 25 to 64 by at least 25 percent to fewer than 400 per 100,000	532.9	520.3	500.2	498.0	462.3	452.8	443.5	438.7	431.0	400
Older adults (65 years and over)					Restricted-activity days per person					
To improve the health and quality of life for older adults and, by 1990, to reduce the average annual number of days of restricted activity due to acute and chronic conditions by 20 percent, to fewer than 30 days per year for people aged 65 and older[1]	36.5	40.3	41.9	39.2	31.6	32.1	31.8	33.1	32.1	30
					Bed-disability days per person					
To reduce the average annual number of days of bed disability due to acute and chronic conditions by 20 percent, to fewer than 12 days per year for people aged 65 and over[1]	14.5	14.5	13.7	13.8	14.7	16.7	15.1	13.7	14.9	12

[1]Levels of estimates for 1982–86 may not be comparable to estimates for previous years because the 1982–86 data are based on a revised questionnaire and field procedures.

SOURCES: Office of the Assistant Secretary for Health and Surgeon General: *Healthy People—The Surgeon General's Report on Health Promotion and Disease Prevention, 1979*. DHEW Pub. No. (PHS) 79-55071. Public Health Service. Washington. U.S. Government Printing Office, 1979; National Center for Health Statistics: *Vital Statistics of the United States*, Vol. II, Mortality, Part A, 1977–85. Public Health Service. Washington. U.S. Government Printing Office. 1986. To be published; Data computed by Division of Analysis from data compiled by Division of Vital Statistics and from table 1; Division of Health Interview Statistics: Current estimates from the National Health Interview Survey: United States, 1986. *Vital and Health Statistics*. Series 10, No. 164. DHHS Pub. No. (PHS) 87-1592. Public Health Service. Washington. U.S. Government Printing Office, Oct. 1987.

Table 38. Vaccinations of children 1–4 years of age for selected diseases, according to race and residence in metropolitan statistical area (MSA): United States, 1970, 1976, and 1983–85

[Data are based on household interviews of a sample of the civilian noninstitutionalized population]

Vaccination and year	Total	Race		Inside MSA		Outside MSA
		White	All other	Central city	Remaining areas	
All respondents	Percent of population					
Measles:						
1970	57.2	60.4	41.9	55.2	61.7	54.3
1976	65.9	68.3	54.8	62.5	67.2	67.3
1983	64.9	66.8	57.2	60.4	66.3	66.7
1984	62.8	65.4	52.0	56.6	63.3	66.4
1985	60.8	63.6	48.8	55.5	63.3	61.9
Rubella:						
1970	37.2	38.3	31.8	38.3	39.2	34 3
1976	61.7	63.8	51.5	59.5	63.5	61.5
1983	64.0	66.3	54.7	59.5	65.2	68.0
1984	60.9	63.9	48.3	56.1	60.4	64.6
1985	58.9	61.6	47.7	53.9	61.0	60.3
DTP:[1,2]						
1970	76.1	79.7	58.8	68.9	80.7	77.1
1976	71.4	75.3	53.2	64.1	75.7	72.9
1983	65.7	70.1	47.7	55.4	69.4	69.4
1984	65.7	69.1	51.3	57.9	66.6	69.8
1985	64.9	68.7	48.7	55.5	68.4	67.9
Polio:[2]						
1970	65.9	69.2	50.1	61.0	70.8	64.7
1976	61.6	66.2	39.9	53.8	65.3	63.9
1983	57.0	61.9	36.7	47.7	60.3	60.3
1984	54.8	58.4	39.9	48.7	55.2	58.5
1985	55.3	58.9	40.1	47.1	58.4	58.0
Mumps:						
1970	- - -	- - -	- - -	- - -	- - -	- - -
1976	48.3	50.3	38.7	45.6	50.7	47.9
1983	59.5	61.8	50.0	52.6	60.2	63.6
1984	58.7	61.3	47.7	51.8	58.3	63.6
1985	58.9	61.8	47.0	52.4	61.0	61.4
Respondents consulting vaccination records, 1985[3]						
Measles	76.9	78.1	67.2	73.5	76.7	79.0
Rubella	73.8	75.0	64.1	70.4	75.0	74.6
DTP[1,2]	87.0	88.5	75.2	79.6	89.7	88.6
Polio[2]	75.7	77.5	61.5	68.9	79.6	75.9
Mumps	75.5	77.1	62.7	70.5	76.8	77.0

[1] Diphtheria-tetanus-pertussis.
[2] 3 doses or more.
[3] The data in this panel are based only on 35 percent of white respondents and 19 percent of all other respondents who consulted records for some or all vaccination questions. One month prior to interview all sampled households were asked to check vaccination records such as those from a private physician, the health department, or military.

NOTE: Beginning in 1976, the category "don't know" was added to response categories. Prior to 1976, the lack of this option resulted in some forced positive answers, particularly for vaccinations requiring multiple dose schedules, that is, polio and DTP.

SOURCE: Division of Immunization, Center for Prevention Services, Centers for Disease Control: Unpublished data from the United States Immunization Survey.

Table 39. Selected notifiable disease rates, according to disease: United States, selected years 1950–87

[Data are based on reporting by State health departments]

Disease	1950	1960	1970	1980	1984	1985	1986	1987
				Cases per 100,000 population				
Diphtheria	3.83	0.51	0.21	0.00	0.00	0.00	0.00	0.00
Hepatitis A[1]	---	23.15	27.87	12.84	9.33	10.03	10.02	10.39
Hepatitis B[1]	---		4.08	8.39	11.06	11.50	11.17	10.65
Mumps	---	---	55.55	3.86	1.32	1.30	3.37	5.43
Pertussis (whooping cough)	79.82	8.23	2.06	0.76	0.96	1.50	1.74	1.16
Poliomyelitis, total	22.02	1.77	0.02	0.00	0.00	0.00	0.00	0.00
Paralytic[2]		1.40	0.02	0.00	0.00	0.00	0.00	0.00
Rubella (German measles)	---	---	27.75	1.72	0.32	0.26	0.23	0.13
Rubeola (measles)	211.01	245.42	23.23	5.96	1.10	1.18	2.61	1.50
Salmonellosis, excluding typhoid fever	---	3.85	10.84	14.88	17.30	27.37	20.73	20.92
Shigellosis	15.45	6.94	6.79	8.41	7.36	7.14	7.11	9.80
Tuberculosis[3]	80.50	30.83	18.22	12.25	9.42	9.30	9.44	9.25
Varicella (chickenpox)	---	---	---	96.69	138.44	123.23	122.42	136.68
Sexually transmitted diseases:[4]								
Syphilis[5]	146.02	68.78	45.26	30.51	29.81	28.50	28.53	35.81
Primary and secondary	16.73	9.06	10.89	12.06	12.20	11.45	11.67	14.54
Early latent	39.71	10.11	8.08	9.00	9.87	9.15	9.12	11.55
Late and late latent	70.22	45.91	24.94	9.30	7.60	7.77	7.58	9.44
Congenital	8.97	2.48	0.97	0.12	0.14	0.14	0.17	0.28
Gonorrhea	192.45	145.33	297.22	444.99	374.74	384.28	376.37	323.14
Chancroid	3.34	0.94	0.70	0.35	0.28	0.87	1.30	2.07
Granuloma inguinale	1.19	0.17	0.06	0.02	0.01	0.02	0.02	0.01
Lymphogranuloma venereum	0.95	0.47	0.30	0.09	0.07	0.10	0.14	0.13
				Number of cases				
Diphtheria	5,796	918	435	3	1	3	–	3
Hepatitis A[1]	---	41,666	56,797	29,087	22,040	23,210	23,430	25,280
Hepatitis B[1]	---		8,310	19,015	26,115	26,611	26,107	25,916
Mumps	---	---	104,953	8,576	3,021	2,982	7,790	12,848
Pertussis (whooping cough)	120,718	14,809	4,249	1,730	2,276	3,589	4,195	2,823
Poliomyelitis, total	33,300	3,190	33	9	8	7	8	–
Paralytic[2]		2,525	31	8	8	7	8	–
Rubella (German measles)	---	---	56,552	3,904	752	630	551	306
Rubeola (measles)	319,124	441,703	47,351	13,506	2,587	2,822	6,282	3,655
Salmonellosis, excluding typhoid fever	---	6,929	22,096	33,715	40,861	65,347	49,984	50,916
Shigellosis	23,367	12,487	13,845	19,041	17,371	17,057	17,138	23,860
Tuberculosis[3]	121,742	55,494	37,137	27,749	22,255	22,201	22,768	22,517
Varicella (chickenpox)	---	---	---	190,894	221,983	178,162	183,243	213,196
Sexually transmitted diseases:[4]								
Syphilis[5]	217,558	122,538	91,382	68,832	69,888	67,563	68,291	86,545
Primary and secondary	23,939	16,145	21,982	27,204	28,607	27,131	27,921	35,145
Early latent	59,256	18,017	16,311	20,297	23,132	21,689	21,819	27,914
Late and late latent	113,569	81,798	50,348	20,979	17,827	18,414	18,149	22,811
Congenital	13,377	4,416	1,953	277	322	329	410	681
Gonorrhea	286,746	258,933	600,072	1,004,029	878,556	911,419	900,856	780,905
Chancroid	4,977	1,680	1,416	788	665	2,067	3,102	4,998
Granuloma inguinale	1,783	296	124	51	30	44	56	22
Lymphogranuloma venereum	1,427	835	612	199	170	226	335	303

[1] Reports from New York City are not available for 1985 and 1986.
[2] Data for 1986 updated due to late reports; data for 1987 may also be updated.
[3] Data after 1974 are not comparable to prior years because of changes in reporting criteria effective in 1975.
[4] Newly reported civilian cases.
[5] Includes stage of syphilis not stated.

NOTES: Rates greater than 0 but less than 0.005 are shown as 0.00. The total resident population was used to calculate all rates except sexually transmitted diseases, for which the civilian resident population was used. Population data from those States where diseases were not notifiable or not available were excluded from rate calculation.

SOURCES: Centers for Disease Control: Final 1986 reports of notifiable diseases, *Morbidity and Mortality Weekly Report* 35(55). Public Health Service, Atlanta, Ga., Sept. 1987; Final 1987 reports of notifiable diseases, *Morbidity and Mortality Weekly Report* 36(54). Public Health Service, Atlanta, Ga., Sept. 1988, in press; Division of Sexually Transmitted Diseases, Center for Prevention Services, Centers for Disease Control: Selected data.

Table 40. Acquired immunodeficiency syndrome (AIDS) cases, according to age, sex, and race/ethnicity: United States, 1982–88

[Data are based on reporting by State health departments]

Age, sex, and race/ethnicity	All years[1,2]	1982	1983	1984	1985	1986	1987	1988[2]	All years[1,2]	12 months ending November 30, 1988
	Number, by year of report								Percent distribution	Cases per 100,000 population[3]
Total[4]	77,883	664	2,073	4,449	8,233	13,174	21,123	27,975	...	12.61
Male										
All males, 13 years and over[4]	70,239	603	1,896	4,122	7,581	12,025	19,136	24,688	100.0	28.56
White, not Hispanic	43,696	345	1,141	2,610	4,846	7,577	12,377	14,680	62.2	21.42
Black, not Hispanic	16,950	173	475	945	1,722	2,757	4,316	6,521	24.1	67.85
Hispanic	8,944	83	268	536	961	1,584	2,242	3,246	12.7	52.34
13–19 years	245	2	5	17	29	42	71	79	0.3	0.70
20–29 years	14,231	145	394	847	1,493	2,496	3,843	4,979	20.3	26.09
30–39 years	32,963	279	886	1,988	3,636	5,681	8,885	11,512	46.9	63.18
40–49 years	15,518	128	437	898	1,661	2,558	4,290	5,504	22.1	42.33
50–59 years	5,366	44	150	307	602	924	1,467	1,858	7.6	19.98
60 years and over	1,916	5	26	65	160	324	580	756	2.7	4.85
Female										
All females, 13 years and over[4]	6,423	48	141	277	523	963	1,668	2,797	100.0	3.00
White, not Hispanic	1,856	9	34	79	141	271	545	776	28.9	1.07
Black, not Hispanic	3,467	32	66	141	283	520	883	1,540	54.0	14.00
Hispanic	1,034	7	37	57	94	160	228	449	16.1	7.03
13–19 years	54	–	3	4	4	11	10	22	0.8	0.20
20–29 years	1,825	19	58	94	175	275	476	725	28.4	3.90
30–39 years	3,022	19	50	130	233	448	745	1,394	47.0	7.57
40–49 years	813	7	14	25	49	129	227	362	12.7	2.70
50–59 years	313	3	11	7	26	46	89	131	4.9	1.25
60 years and over	396	–	5	17	36	54	121	163	6.2	0.78
Children										
All children, under 13 years[4]	1,221	13	34	50	129	186	319	490	100.0	1.17
White, not Hispanic	294	5	6	10	25	42	81	125	24.1	0.43
Black, not Hispanic	675	5	22	29	86	106	162	265	55.3	4.08
Hispanic	242	3	6	11	18	37	73	94	19.8	2.19
Under 5 years	1,063	12	33	47	119	166	278	408	87.1	2.41
5–12 years	158	1	1	3	10	20	41	82	12.9	0.31

[1]Includes cases prior to 1982.
[2]Data are as of November 30, 1988, and reflect reporting delays.
[3]Resident population as of mid-1988, based on extrapolation from 1980–85 data from the U.S. Bureau of the Census.
[4]Includes all other races not shown separately.

NOTES: The AIDS case definition was changed in September 1987 to allow for the presumptive diagnosis of AIDS-associated diseases and conditions and to expand the spectrum of human immunodeficiency virus-associated diseases reportable as AIDS. Excludes residents of U.S. territories.

SOURCE: Centers for Disease Control, Center for Infectious Diseases, AIDS Program.

Table 41. Acquired immunodeficiency syndrome (AIDS) deaths, according to age, sex, and race/ethnicity: United States, 1982–88

[Data are based on reporting by State health departments]

Age, sex, and race/ethnicity	All years[1,2]	1982	1983	1984	1985	1986	1987	1988[2]	All years[1,2]
	Number, by year of death								Percent distribution
Total[3]	43,790	431	1,402	3,122	6,010	10,010	12,843	9,657	...
Male									
All males, 13 years and over[3]	39,551	384	1,271	2,849	5,510	9,107	11,514	8,651	100.0
White, not Hispanic	24,408	197	716	1,751	3,456	5,765	7,031	5,354	61.7
Black, not Hispanic	9,957	121	368	691	1,331	2,123	2,936	2,294	25.2
Hispanic	4,861	65	177	380	686	1,154	1,448	920	12.3
13–19 years	129	–	3	12	23	30	35	25	0.3
20–29 years	7,712	73	266	563	1,067	1,769	2,222	1,700	19.5
30–39 years	18,001	187	579	1,300	2,518	4,167	5,247	3,874	45.5
40–49 years	8,915	79	297	646	1,224	2,053	2,584	1,974	22.5
50–59 years	3,409	38	112	257	510	763	958	749	8.6
60 years and over	1,385	7	14	71	168	325	468	329	3.5
Female									
All females, 13 years and over[3]	3,542	36	102	228	404	767	1,099	870	100.0
White, not Hispanic	1,072	9	23	53	130	230	356	263	30.3
Black, not Hispanic	1,932	20	54	129	194	408	608	496	54.5
Hispanic	505	6	25	44	76	120	127	103	14.3
13–19 years	34	1	2	1	5	9	10	6	1.0
20–29 years	992	12	39	88	122	213	290	217	28.0
30–39 years	1,579	16	35	98	181	352	477	404	44.6
40–49 years	437	4	12	21	43	84	149	121	12.3
50–59 years	194	2	9	6	15	33	74	52	5.5
60 years and over	306	1	5	14	38	76	99	70	8.6
Children									
All children, under 13 years[3]	697	11	29	45	96	136	230	136	100.0
White, not Hispanic	183	4	6	8	26	30	63	42	26.3
Black, not Hispanic	368	6	19	26	56	73	111	71	52.8
Hispanic	137	1	4	11	13	31	52	21	19.7
Under 5 years	618	10	28	43	87	117	202	117	88.7
5–12 years	79	1	1	2	9	19	28	19	11.3

[1] Includes deaths prior to 1982.
[2] Data are as of November 30, 1988, and reflect reporting delays.
[3] Includes all other races not shown separately.

NOTES: The AIDS case definition was changed in September 1987 to allow for the presumptive diagnosis of AIDS-associated diseases and conditions and to expand the spectrum of human immunodeficiency virus-associated diseases reportable as AIDS. Excludes residents of U.S. territories.

SOURCE: Centers for Disease Control, Center for Infectious Diseases, AIDS Program.

Table 42 (page 1 of 2). Acquired immunodeficiency syndrome (AIDS) cases, according to race/ethnicity, sex, and transmission category for persons 13 years of age and over: United States, 1982–88

[Data are based on reporting by State health departments]

Race/ethnicity, sex, and transmission category	All years[1,2]	1982	1983	1984	1985	1986	1987	1988[2]	All years[1,2]	1984	1986	1988[2]
	Number, by year of report								Percent distribution			
Total[3]	76,662	651	2,039	4,399	8,104	12,988	20,804	27,485	100.0	100.0	100.0	100.0
Male homosexual/bisexual	48,198	394	1,267	2,869	5,443	8,541	13,501	16,033	62.9	65.2	65.8	58.3
Intravenous drug use	14,542	121	368	773	1,392	2,222	3,502	6,142	19.0	17.6	17.1	22.4
Male homosexual/bisexual and intravenous drug use	5,421	56	199	406	589	972	1,505	1,680	7.1	9.3	7.5	6.1
Hemophilia/coagulation disorder	744	7	12	35	74	125	218	273	1.0	0.8	1.0	1.0
Born in Caribbean/African countries	1,226	45	84	110	143	217	266	356	1.6	2.5	1.7	1.3
Heterosexual[4]	2,123	7	23	57	129	333	594	979	2.8	1.3	2.6	3.6
Sexual contact with intravenous drug user	1,505	6	15	43	97	224	398	721	2.0	1.0	1.7	2.6
Transfusion	1,937	6	26	53	165	300	621	766	2.5	1.2	2.3	2.8
Undetermined[5]	2,471	15	60	94	169	278	597	1,256	3.2	2.1	2.1	4.6
Race/ethnicity												
White, not Hispanic	45,552	354	1,175	2,689	4,987	7,848	12,922	15,456	100.0	100.0	100.0	100.0
Male homosexual/bisexual	35,451	279	929	2,162	4,083	6,253	10,033	11,603	77.8	80.4	79.7	75.1
Intravenous drug use	3,041	31	71	145	251	406	816	1,317	6.7	5.4	5.2	8.5
Male homosexual/bisexual and intravenous drug use	3,388	25	124	265	376	646	971	974	7.4	9.9	8.2	6.3
Hemophilia/coagulation disorder	631	7	11	25	63	113	187	225	1.4	0.9	1.4	1.5
Born in Caribbean/African countries	5	–	–	1	1	1	1	1	0.0	0.0	0.0	0.0
Heterosexual[4]	647	1	2	16	31	93	196	308	1.4	0.6	1.2	2.0
Sexual contact with intravenous drug user	349	1	–	9	16	39	99	185	0.8	0.3	0.5	1.2
Transfusion	1,446	5	21	40	127	232	469	552	3.2	1.5	3.0	3.6
Undetermined[5]	943	6	17	35	55	104	249	476	2.1	1.3	1.3	3.1
Black, not Hispanic	20,417	205	541	1,086	2,005	3,277	5,199	8,061	100.0	100.0	100.0	100.0
Male homosexual/bisexual	7,616	77	192	399	794	1,321	2,083	2,727	37.3	36.7	40.3	33.8
Intravenous drug use	7,796	55	180	404	747	1,191	1,853	3,355	38.2	37.2	36.3	41.6
Male homosexual/bisexual and intravenous drug use	1,416	17	44	94	142	228	380	507	6.9	8.7	7.0	6.3
Hemophilia/coagulation disorder	50	–	–	5	4	5	12	24	0.2	0.5	0.2	0.3
Born in Caribbean/African countries	1,210	44	83	109	142	214	282	351	5.9	10.0	6.5	4.4
Heterosexual[4]	1,038	4	11	23	73	160	293	474	5.1	2.1	4.9	5.9
Sexual contact with intravenous drug user	799	4	6	18	59	116	223	373	3.9	1.7	3.5	4.6
Transfusion	313	–	2	10	27	44	92	138	1.5	0.9	1.3	1.7
Undetermined[5]	978	8	29	42	76	114	224	485	4.8	3.9	3.5	6.0
Hispanic	9,978	90	305	593	1,055	1,744	2,470	3,695	100.0	100.0	100.0	100.0
Male homosexual/bisexual	4,643	37	137	286	526	882	1,235	1,523	46.5	48.2	50.6	41.2
Intravenous drug use	3,639	34	113	222	386	613	822	1,443	36.5	37.4	35.2	39.1
Male homosexual/bisexual and intravenous drug use	589	14	29	47	69	95	140	194	5.9	7.9	5.5	5.3
Hemophilia/coagulation disorder	49	–	1	4	7	5	12	20	0.5	0.7	0.3	0.5
Born in Caribbean/African countries	8	1	1	–	–	1	3	2	0.1	–	0.1	0.1
Heterosexual[4]	419	2	10	18	25	77	102	184	4.2	3.0	4.4	5.0
Sexual contact with intravenous drug user	349	1	9	16	22	69	75	156	3.5	2.7	4.0	4.2
Transfusion	132	1	2	2	7	19	42	59	1.3	0.3	1.1	1.6
Undetermined[5]	499	1	12	14	35	52	114	270	5.0	2.4	3.0	7.3
Sex												
Male	70,239	603	1,898	4,122	7,581	12,025	19,136	24,688	100.0	100.0	100.0	100.0
Homosexual/bisexual	48,198	394	1,267	2,869	5,443	8,541	13,501	16,033	68.6	69.6	71.0	64.9
Intravenous drug use	11,228	98	288	606	1,113	1,748	2,678	4,680	16.0	14.7	14.5	19.0
Homosexual/bisexual and intravenous drug use	5,421	56	199	406	589	972	1,505	1,680	7.7	9.9	8.1	6.8
Hemophilia/coagulation disorder	724	7	12	33	71	120	214	267	1.0	0.8	1.0	1.1
Born in Caribbean/African countries	925	36	72	93	113	162	193	251	1.3	2.3	1.4	1.0
Heterosexual[4]	516	–	2	12	22	61	146	273	0.7	0.3	0.5	1.1
Sexual contact with intravenous drug user	375	–	1	11	21	41	105	196	0.5	0.3	0.3	0.8
Transfusion	1,236	2	16	30	107	200	410	471	1.8	0.7	1.7	1.9
Undetermined[5]	1,991	10	42	71	123	221	489	1,033	2.8	1.7	1.8	4.2

See footnotes at end of table.

Table 42 (page 2 of 2). Acquired immunodeficiency syndrome (AIDS) cases, according to race/ethnicity, sex, and transmission category for persons 13 years of age and over: United States, 1982–88

[Data are based on reporting by State health departments]

Race/ethnicity, sex, and transmission category	All years[1,2]	1982	1983	1984	1985	1986	1987	1988[2]	All years[1,2]	1984	1986	1988[2]
	Number, by year of report								Percent distribution			
Female	6,423	48	141	277	523	963	1,668	2,797	100.0	100.0	100.0	100.0
Intravenous drug use	3,314	23	80	167	279	474	824	1,462	51.6	60.3	49.2	52.3
Hemophilia/coagulation disorder	20	–	–	2	3	5	4	6	0.3	0.7	0.5	0.2
Born in Caribbean/African countries	301	9	12	17	30	55	73	105	4.7	6.1	5.7	3.8
Heterosexual[4]	1,607	7	21	45	107	272	448	706	25.0	16.2	28.2	25.2
Sexual contact with intravenous drug user	1,130	6	14	32	76	183	293	525	17.6	11.6	19.0	18.8
Transfusion	701	4	10	23	58	100	211	295	10.9	8.3	10.4	10.6
Undetermined[5]	480	5	18	23	46	57	108	223	7.5	8.3	5.9	8.0

[1]Includes cases prior to 1982.
[2]Data are as of November 30, 1988 and reflect reporting delays.
[3]Includes all other races not shown separately.
[4]Includes persons who have had heterosexual contact with a person with human immunodeficiency virus (HIV) infection or at risk of HIV infection.
[5]Includes persons for whom risk information is incomplete (because of death, refusal to be interviewed, or loss to followup), persons still under investigation, men reported only to have had heterosexual contact with prostitutes, and interviewed persons for whom no specific risk is identified.

NOTES: The AIDS case definition was changed in September 1987 to allow for the presumptive diagnosis of AIDS-associated diseases and conditions and to expand the spectrum of human immunodeficiency virus-associated diseases reportable as AIDS. Excludes residents of U.S. territories.

SOURCE: Centers for Disease Control, Center for Infectious Diseases, AIDS Program.

Table 43 (page 1 of 2). Acquired immunodeficiency syndrome (AIDS) deaths, according to race/ethnicity, sex, and transmission category for persons 13 years of age and over: United States, 1982–88

[Data are based on reporting by State health departments]

Race/ethnicity, sex, and transmission category	All years[1,2]	1982	1983	1984	1985	1986	1987	1988[2]	All years[1,2]	1984	1986	1988[2]
	Number, by year of death								Percent distribution			
Total[3]	43,093	420	1,373	3,077	5,914	9,874	12,613	9,521	100.0	100.0	100.0	100.0
Male homosexual/bisexual	27,053	244	816	1,915	3,821	6,409	7,774	5,917	62.8	62.2	64.9	62.2
Intravenous drug use	7,947	82	275	588	1,067	1,684	2,419	1,759	18.4	19.1	17.1	18.5
Male homosexual/bisexual and intravenous drug use	3,254	38	129	294	444	744	921	660	7.6	9.6	7.5	6.9
Hemophilia/coagulation disorder	452	6	6	24	70	96	140	109	1.1	0.8	1.0	1.1
Born in Caribbean/African countries	676	29	72	74	99	123	160	98	1.6	2.4	1.3	1.0
Heterosexual[4]	1,061	3	15	42	104	221	353	319	2.5	1.4	2.2	3.4
Sexual contact with intravenous drug user	726	3	9	35	71	151	243	214	1.7	1.1	1.5	2.3
Transfusion	1,349	3	19	64	169	320	446	324	3.1	2.1	3.2	3.4
Undetermined[5]	1,301	15	41	76	140	277	400	335	3.0	2.5	2.8	3.5
Race/ethnicity												
White, not Hispanic	25,480	206	739	1,804	3,586	5,995	7,387	5,617	100.0	100.0	100.0	100.0
Male homosexual/bisexual	19,676	159	573	1,409	2,840	4,709	5,594	4,288	77.2	78.1	78.6	76.3
Intravenous drug use	1,587	14	63	101	206	306	513	365	6.2	5.6	5.1	6.5
Male homosexual/bisexual and intravenous drug use	1,986	14	73	184	278	480	569	376	7.8	10.2	8.0	6.7
Hemophilia/coagulation disorder	392	6	5	21	57	85	120	97	1.5	1.2	1.4	1.7
Born in Caribbean/African countries	1	–	–	1	–	–	–	–	0.0	0.1	–	–
Heterosexual[4]	312	1	2	5	27	70	98	109	1.2	0.3	1.2	1.9
Sexual contact with intravenous drug user	152	1	–	4	9	34	52	52	0.6	0.2	0.6	0.9
Transfusion	1,035	3	15	51	126	250	338	249	4.1	2.8	4.2	4.4
Undetermined[5]	491	9	8	32	52	95	155	133	1.9	1.8	1.6	2.4
Black, not Hispanic	11,889	141	422	820	1,525	2,531	3,544	2,790	100.0	100.0	100.0	100.0
Male homosexual/bisexual	4,551	54	148	287	585	1,013	1,352	1,074	38.3	35.0	40.0	38.5
Intravenous drug use	4,459	41	133	321	584	950	1,338	1,052	37.5	39.2	37.5	37.7
Male homosexual/bisexual and intravenous drug use	889	11	38	72	115	182	252	211	7.5	8.8	7.2	7.6
Hemophilia/coagulation disorder	29	–	–	1	6	3	12	7	0.2	0.1	0.1	0.3
Born in Caribbean/African countries	671	29	72	73	98	122	158	98	5.6	8.9	4.8	3.5
Heterosexual[4]	558	1	8	24	53	97	206	165	4.7	2.9	3.8	5.9
Sexual contact with intravenous drug user	419	1	5	19	42	72	153	125	3.5	2.3	2.8	4.5
Transfusion	195	–	1	10	27	39	70	48	1.6	1.2	1.5	1.7
Undetermined[5]	537	5	22	32	57	125	156	135	4.5	3.9	4.9	4.8
Hispanic	5,366	71	202	424	762	1,274	1,575	1,023	100.0	100.0	100.0	100.0
Male homosexual/bisexual	2,580	30	89	198	372	641	752	485	48.1	46.7	50.3	47.4
Intravenous drug use	1,875	26	77	163	272	422	563	338	34.9	38.4	33.1	33.0
Male homosexual/bisexual and intravenous drug use	361	13	17	37	49	77	95	69	6.7	8.7	6.0	6.7
Hemophilia/coagulation disorder	27	–	1	2	5	8	6	5	0.5	0.5	0.6	0.5
Born in Caribbean/African countries	4	–	–	–	1	1	2	–	0.1	–	0.1	–
Heterosexual[4]	186	1	5	13	24	52	48	43	3.5	3.1	4.1	4.2
Sexual contact with intravenous drug user	158	1	4	12	20	45	38	36	2.9	2.8	3.5	3.5
Transfusion	85	–	2	2	10	23	25	23	1.6	0.5	1.8	2.3
Undetermined[5]	248	1	11	9	29	50	84	60	4.6	2.1	3.9	5.9
Sex												
Male	39,551	384	1,271	2,849	5,510	9,107	11,514	8,651	100.0	100.0	100.0	100.0
Homosexual/bisexual	27,053	244	816	1,915	3,821	6,409	7,774	5,917	68.4	67.2	70.4	68.4
Intravenous drug use	6,152	62	219	451	854	1,306	1,877	1,330	15.6	15.8	14.3	15.4
Homosexual/bisexual and intravenous drug use	3,254	38	129	294	444	744	921	660	8.2	10.3	8.2	7.6
Hemophilia/coagulation disorder	440	6	6	23	66	93	139	106	1.1	0.8	1.0	1.2
Born in Caribbean/African countries	509	23	64	57	83	83	115	69	1.3	2.0	0.9	0.8
Heterosexual[4]	250	–	1	7	22	41	84	93	0.6	0.2	0.5	1.1
Sexual contact with intravenous drug user	184	–	–	7	19	30	58	69	0.5	0.3	0.3	0.8
Transfusion	859	1	8	43	110	222	272	202	2.2	1.5	2.4	2.3
Undetermined[5]	1,034	10	26	59	110	209	332	274	2.6	2.1	2.3	3.2

See footnotes at end of table.

Table 43 (page 2 of 2). Acquired immunodeficiency syndrome (AIDS) deaths, according to race/ethnicity, sex, and transmission category for persons 13 years of age and over: United States, 1982–88

[Data are based on reporting by State health departments]

Race/ethnicity, sex, and transmission category	All years[1,2]	1982	1983	1984	1985	1986	1987	1988[2]	All years[1,2]	1984	1986	1988[2]
	Number, by year of death								Percent distribution			
Female	3,542	36	102	228	404	767	1,099	870	100.0	100.0	100.0	100.0
Intravenous drug use	1,795	20	56	137	213	378	542	429	50.7	60.1	49.3	49.3
Hemophilia/coagulation disorder	12	–	–	1	4	3	1	3	0.3	0.4	0.4	0.3
Born in Caribbean/African countries	167	6	8	17	16	40	45	29	4.7	7.5	5.2	3.3
Heterosexual[4]	811	3	14	35	82	180	269	226	22.9	15.4	23.5	26.0
Sexual contact with intravenous drug user	544	3	9	28	52	121	185	145	15.4	12.3	15.8	16.7
Transfusion	490	2	11	21	59	98	174	122	13.8	9.2	12.8	14.0
Undetermined[5]	267	5	13	17	30	68	68	61	7.5	7.5	8.9	7.0

[1]Includes deaths prior to 1982.
[2]Data are as of November 30, 1988, and reflect reporting delays.
[3]Includes all other races not shown separately.
[4]Includes persons who have had heterosexual contact with a person with human immunodeficiency virus (HIV) infection or at risk of HIV infection.
[5]Includes persons for whom risk information is incomplete (because of death, refusal to be interviewed, or loss to followup), persons still under investigation, men reported only to have had heterosexual contact with prostitutes, and interviewed persons for whom no specific risk is identified.

NOTES: The AIDS case definition was changed in September 1987 to allow for the presumptive diagnosis of AIDS-associated diseases and conditions and to expand the spectrum of human immunodeficiency virus-associated diseases reportable as AIDS. Excludes residents of U.S. territories.

SOURCE: Centers for Disease Control, Center for Infectious Diseases, AIDS Program.

best copy available

Table 44 (page 1 of 2). Acquired immunodeficiency syndrome (AIDS) cases, according to geographic division and State: United States, 1982–88

[Data are based on reporting by State health departments]

Geographic division and State	All years[1,2]	1982	1983	1984	1985	1986	1987	1988[2]	All years[1,2]	12 months ending November 30, 1988
	Number, by year of report								Percent distribution	Cases per 100,000 population[3]
United States	77,883	664	2,073	4,449	8,233	13,174	21,123	27,975	100.0	12.61
New England	3,079	19	57	154	283	529	849	1,181	4.0	9.87
Maine	88	–	–	–	11	21	29	27	0.1	2.45
New Hampshire	90	1	1	3	4	13	32	36	0.1	3.92
Vermont	35	1	–	1	2	6	15	10	0.0	2.38
Massachusetts	1,688	10	33	87	167	282	456	650	2.2	11.77
Rhode Island	203	–	4	6	12	31	69	81	0.3	9.88
Connecticut	975	7	19	57	87	176	248	377	1.3	12.33
Middle Atlantic	26,993	421	1,040	1,959	3,163	4,867	6,132	9,289	34.7	27.68
New York	19,423	352	867	1,588	2,492	3,795	3,966	6,254	24.9	38.52
New Jersey	5,500	54	136	281	469	770	1,516	2,264	7.1	33.88
Pennsylvania	2,070	15	37	90	202	302	650	771	2.7	7.21
East North Central	4,852	25	60	198	358	833	1,403	1,969	6.2	5.26
Ohio	1,078	7	7	29	54	210	328	442	1.4	4.82
Indiana	339	–	3	26	27	71	132	80	0.4	1.93
Illinois	2,272	15	39	101	192	361	635	925	2.9	8.85
Michigan	883	3	9	32	61	149	211	417	1.1	4.64
Wisconsin	280	–	2	10	24	42	97	105	0.4	2.45
West North Central	1,613	5	14	45	130	241	467	711	2.1	4.36
Minnesota	433	3	4	11	41	98	130	146	0.6	3.89
Iowa	101	–	–	3	12	20	27	39	0.1	1.44
Missouri	786	1	7	27	51	73	236	391	1.0	8.28
North Dakota	10	–	–	–	2	3	1	4	0.0	0.58
South Dakota	12	–	–	–	1	2	2	7	0.0	0.97
Nebraska	79	–	1	2	7	10	24	35	0.1	2.48
Kansas	192	1	2	2	16	35	47	89	0.3	3.73
South Atlantic	12,901	74	272	585	1,306	2,051	3,662	4,937	16.6	12.79
Delaware	140	–	2	4	12	22	38	62	0.2	10.92
Maryland	1,382	3	27	53	150	189	451	497	1.8	12.24
District of Columbia	1,423	2	19	90	177	226	467	441	1.8	78.91
Virginia	919	–	28	40	109	159	243	340	1.2	6.06
West Virginia	57	–	–	6	7	8	20	16	0.1	0.84
North Carolina	648	2	8	15	65	81	205	272	0.8	4.92
South Carolina	364	–	11	7	38	58	84	166	0.5	4.97
Georgia	1,764	8	24	56	193	300	509	671	2.3	11.66
Florida	6,204	59	153	314	555	1,008	1,635	2,472	8.0	21.83
East South Central	1,314	2	10	24	72	164	323	719	1.7	5.07
Kentucky	196	–	4	10	17	32	47	88	0.3	2.45
Tennessee	500	–	2	5	18	72	73	330	0.6	7.19
Alabama	420	2	3	6	29	32	153	195	0.5	5.18
Mississippi	196	–	1	3	8	28	50	106	0.3	4.71
West South Central	6,776	17	111	315	619	1,186	2,171	2,354	8.7	9.37
Arkansas	165	–	–	1	10	30	48	76	0.2	3.38
Louisiana	1,023	–	18	55	103	164	338	345	1.3	8.28
Oklahoma	318	–	5	9	20	50	107	127	0.4	4.11
Texas	5,270	17	88	250	486	942	1,678	1,806	6.8	11.50
Mountain	2,080	7	32	75	164	338	641	822	2.7	6.91
Montana	29	–	–	–	1	5	7	16	0.0	2.01
Idaho	26	–	–	–	3	3	10	10	0.0	0.97
Wyoming	13	–	–	1	--	4	2	6	0.0	1.16
Colorado	820	5	21	38	63	167	227	299	1.1	9.48
New Mexico	135	–	–	3	14	21	47	49	0.2	3.40
Arizona	639	1	7	20	51	80	219	261	0.8	8.92
Utah	152	–	2	8	19	22	39	62	0.2	3.65
Nevada	266	1	2	5	13	36	90	119	0.3	15.34

See footnotes at end of table.

Table 44 (page 2 of 2). Acquired immunodeficiency syndrome (AIDS) cases, according to geographic division and State: United States, 1982–88

[Data are based on reporting by State health departments]

Geographic division and State	All years[1,2]	1982	1983	1984	1985	1986	1987	1988[2]	All years[1,2]	12 months ending November 30, 1988
	Number, by year of report								Percent distribution	Cases per 100,000 population[3]
Pacific	18,275	94	477	1,094	2,138	2,965	5,475	5,993	23.5	18.00
Washington	1,030	1	7	59	114	171	337	341	1.3	8.41
Oregon	452	–	6	13	34	65	160	173	0.6	6.85
California	16,457	93	455	1,008	1,958	2,659	4,883	5,363	21.1	21.31
Alaska	53	–	1	1	5	15	12	19	0.1	3.25
Hawaii	283	–	8	13	27	55	83	97	0.4	9.34

[1]Includes cases prior to 1982.
[2]Data are as of November 30, 1988, and reflect reporting delays.
[3]Resident population as of mid-1988, based on extrapolation from 1980–85 data from the U.S. Bureau of the Census.

NOTES: The AIDS case definition was changed in September 1987 to allow for the presumptive diagnosis of AIDS-associated diseases and conditions and to expand the spectrum of human immunodeficiency virus-associated diseases reportable as AIDS. Excludes residents of U.S. territories.

SOURCE: Centers for Disease Control, Center for Infectious Diseases, AIDS Program.

Table 45. Acquired immunodeficiency syndrome (AIDS) deaths, according to geographic division and State: United States, 1982–88

[Data are based on reporting by State health departments]

Geographic division and State	All years[1,2]	1982	1983	1984	1985	1986	1987	1988[2]	All years[1,2]
	Number, by year of death								Percent distribution
United States	43,790	431	1,402	3,122	6,010	10,010	12,843	9,657	100.0
New England	1,552	14	46	100	217	357	463	337	3.5
Maine	41	–	–	–	7	13	9	12	0.1
New Hampshire	46	1	2	–	6	12	12	12	0.1
Vermont	18	–	1	1	1	6	5	4	0.0
Massachusetts	791	4	30	54	111	170	242	173	1.8
Rhode Island	79	–	2	5	7	19	38	8	0.2
Connecticut	577	9	11	40	85	137	157	128	1.3
Middle Atlantic	14,712	249	739	1,389	2,316	3,460	4,097	2,278	33.6
New York	10,284	200	610	1,074	1,769	2,474	2,767	1,278	23.5
New Jersey	3,170	41	102	231	398	701	920	712	7.2
Pennsylvania	1,258	8	27	84	149	285	410	288	2.9
East North Central	2,694	19	42	132	309	569	815	792	6.2
Ohio	608	5	9	31	61	124	185	191	1.4
Indiana	187	2	5	13	21	57	71	17	0.4
Illinois	1,241	12	21	64	151	262	341	381	2.8
Michigan	504	–	5	16	59	83	167	162	1.2
Wisconsin	154	–	2	8	17	33	51	41	0.4
West North Central	861	4	5	31	96	191	271	260	2.0
Minnesota	238	2	2	7	27	61	76	63	0.5
Iowa	38	1	–	1	6	11	10	7	0.1
Missouri	410	1	2	18	44	83	123	138	0.9
North Dakota	7	–	–	–	2	1	2	2	0.0
South Dakota	8	–	–	–	1	3	1	3	0.0
Nebraska	50	–	1	2	4	9	14	20	0.1
Kansas	110	–	–	3	12	23	45	27	0.3
South Atlantic	7,498	48	185	430	931	1,560	2,254	2,050	17.1
Delaware	64	–	–	2	7	18	22	13	0.2
Maryland	820	4	13	51	106	165	257	221	1.9
District of Columbia	845	4	13	40	127	193	229	233	1.9
Virginia	572	1	20	24	76	130	174	146	1.3
West Virginia	31	–	–	5	7	5	10	4	0.1
North Carolina	300	–	4	23	39	72	98	64	0.7
South Carolina	205	3	–	11	29	34	63	65	0.5
Georgia	1,055	6	17	53	126	205	316	328	2.4
Florida	3,606	30	118	221	414	738	1,085	976	8.2
East South Central	709	3	11	24	72	141	227	229	1.6
Kentucky	120	2	5	10	13	22	33	35	0.3
Tennessee	274	–	3	6	25	64	85	90	0.6
Alabama	226	1	3	6	27	33	78	78	0.5
Mississippi	89	–	–	2	7	22	31	26	0.2
West South Central	4,008	17	77	211	501	948	1,375	866	9.2
Arkansas	87	–	1	–	8	20	30	28	0.2
Louisiana	651	4	13	28	92	134	204	169	1.5
Oklahoma	164	–	1	10	12	36	62	42	0.4
Texas	3,106	13	62	173	389	758	1,079	627	7.1
Mountain	1,164	5	17	61	128	269	357	323	2.7
Montana	12	–	–	–	1	3	5	3	0.0
Idaho	18	–	–	–	1	3	6	8	0.0
Wyoming	7	–	–	1	2	1	2	1	0.0
Colorado	481	3	10	40	56	107	141	124	1.1
New Mexico	73	–	–	1	6	22	22	20	0.2
Arizona	330	2	4	11	39	85	96	92	0.8
Utah	101	–	1	3	12	24	29	32	0.2
Nevada	142	–	2	5	11	24	56	43	0.3
Pacific	10,592	72	280	744	1,440	2,515	2,984	2,522	24.2
Washington	582	–	8	31	81	126	174	162	1.3
Oregon	266	–	3	9	22	69	73	90	0.6
California	9,548	71	267	696	1,306	2,285	2,686	2,204	21.8
Alaska	20	–	1	–	4	6	2	6	0.1
Hawaii	176	1	1	8	27	29	49	60	0.4

[1] Includes deaths prior to 1982.
[2] Data are as of November 30, 1988, and reflect reporting delays.

NOTES: The AIDS case definition was changed in September 1987 to allow for the presumptive diagnosis of AIDS-associated diseases and conditions and to expand the spectrum of human immunodeficiency virus-associated diseases reportable as AIDS. Excludes residents of U.S. territories.

SOURCE: Centers for Disease Control, Center for Infectious Diseases, AIDS Program.

Table 48. Age-adjusted cancer incidence rates for selected cancer sites, according to sex and race: Selected years 1973–86

[Data are based on the Surveillance, Epidemiology, and End Results Program's population-based registries in Atlanta, Detroit, Seattle-Puget Sound, San Francisco-Oakland, Connecticut, Iowa, New Mexico, Utah, and Hawaii]

Race, sex, and site	1973	1975	1977	1979	1981	1983	1985	1986	Average annual percent change[1]
	Number of new cases per 100,000 population[2]								
White male									
All sites	363.7	377.5	391.6	396.7	408.8	415.8	422.4	423.4	1.1
Prostate gland	62.4	68.4	73.9	76.3	80.1	82.8	85.0	87.7	2.3
Lung and bronchus	72.5	75.8	79.9	80.6	83.3	82.2	81.7	80.3	0.9
Oral cavity and pharynx	17.4	18.2	17.0	18.1	17.3	17.9	16.3	15.9	–0.6
Colon and rectum	54.2	54.9	58.4	58.8	60.0	59.9	63.1	61.4	1.0
Colon	34.7	35.9	39.0	39.4	40.2	41.2	43.0	42.3	1.5
Rectum	19.5	19.0	19.4	19.5	19.8	18.7	20.1	19.1	–0.1
Urinary bladder	27.2	28.5	28.0	29.9	30.7	30.4	30.8	31.5	1.0
Stomach	14.0	12.5	11.9	12.1	11.6	10.8	10.5	10.7	–1.9
Leukemia	14.4	14.1	13.6	13.7	13.2	13.8	13.3	12.9	–0.8
Esophagus	4.8	4.8	4.4	5.0	4.3	5.1	5.3	5.1	0.4
Non-Hodgkin's lymphoma	10.3	11.4	11.3	12.0	13.3	14.3	15.5	16.1	3.5
Pancreas	12.7	12.4	11.6	11.0	10.7	11.3	10.7	10.7	–1.0
Black male									
All sites	437.9	435.4	466.2	481.9	524.8	523.2	512.2	502.0	1.6
Prostate gland	105.1	110.8	120.9	122.7	125.8	130.4	127.9	123.4	1.8
Lung and bronchus	104.4	100.8	108.6	110.9	125.0	129.0	127.6	128.1	2.2
Oral cavity and pharynx	16.5	17.2	20.8	24.5	24.6	23.3	21.6	23.7	2.9
Colon and rectum	42.4	46.7	58.2	49.7	58.4	60.4	57.8	55.8	1.9
Colon	31.3	33.8	43.8	36.3	40.9	45.8	44.6	41.2	2.2
Rectum	11.0	12.9	14.4	13.4	17.6	14.5	13.2	14.6	1.1
Urinary bladder	10.7	13.6	17.6	12.9	16.0	15.0	15.6	16.2	2.0
Stomach	25.9	19.8	19.8	22.5	22.5	21.8	18.1	17.9	–1.1
Leukemia	12.0	12.4	10.6	11.0	12.3	11.8	11.9	9.6	–1.0
Esophagus	12.9	17.3	17.6	20.2	19.2	20.0	18.8	20.9	1.7
Non-Hodgkin's lymphoma	9.0	7.1	5.7	9.7	9.3	9.1	9.5	10.9	2.9
Pancreas	15.7	15.4	16.1	15.9	17.5	18.4	19.3	15.1	0.1
White female									
All sites	293.7	308.7	305.8	305.4	316.2	320.8	337.4	332.3	0.8
Breast	83.8	89.0	85.2	86.2	90.6	94.9	105.2	107.3	1.4
Corpus uteri	29.4	33.5	29.6	26.0	24.8	24.5	23.1	22.3	–3.0
Colon and rectum	41.6	42.8	43.9	43.0	44.6	43.8	45.5	42.4	0.3
Colon	30.2	30.9	32.3	30.9	32.5	32.4	33.6	31.6	0.5
Rectum	11.4	12.0	11.6	12.1	12.1	11.4	11.9	10.8	0.0
Lung and bronchus	17.9	21.9	24.6	28.0	31.2	34.4	35.6	37.0	5.2
Ovary	14.6	14.4	14.1	13.4	13.7	13.9	14.9	13.2	–0.4
Cervix uteri	12.7	11.1	9.7	9.1	8.0	8.0	7.4	7.8	–4.0
Pancreas	7.5	7.1	7.6	7.5	7.8	8.1	8.1	7.8	0.7
Non-Hodgkin's lymphoma	7.5	8.4	8.5	9.6	9.9	10.0	10.9	10.8	2.7
Melanoma of skin	5.8	6.8	7.6	7.9	9.4	8.7	9.3	9.1	3.3
Black female									
All sites	279.3	292.4	287.1	297.4	299.7	316.5	320.8	325.5	1.2
Breast	67.9	77.2	70.8	72.4	77.4	85.3	92.2	93.3	2.0
Corpus uteri	14.8	16.8	17.1	14.1	14.3	15.9	14.8	13.8	–0.2
Colon and rectum	40.6	42.7	40.6	43.6	44.9	49.2	45.1	46.9	1.5
Colon	29.2	32.2	29.4	33.8	35.7	36.2	35.6	36.3	2.0
Rectum	11.5	10.5	11.2	9.8	9.2	12.9	9.5	10.5	–0.3
Lung and bronchus	20.7	20.4	28.6	29.4	32.8	34.5	40.5	43.0	5.6
Ovary	10.3	10.1	9.5	10.4	9.8	11.6	10.3	8.8	0.0
Cervix uteri	29.5	27.7	22.9	23.6	18.8	15.0	15.8	15.5	–4.9
Pancreas	11.5	11.7	12.0	11.2	11.0	12.4	11.6	13.2	0.8
Non-Hodgkin's lymphoma	5.4	4.0	4.9	5.3	4.6	7.9	6.6	6.2	3.9

[1]The average annual percent change has been calculated by fitting a linear regression model to the yearly rates from 1973–86.
[2]Age adjusted by the direct method to the 1970 U.S. population.

SOURCE: National Cancer Institute, National Institutes of Health, *1988 Annual Cancer Statistics Review, Including A Report on the Status of Cancer Control*. NIH Pub. No. 89-2789. U.S. Department of Health and Human Services. Public Health Service. Bethesda, Md., 1989.

Table 47. Five-year relative cancer survival rates for selected sites, according to race: 1974–76, 1977–79, and 1980–85

[Data are based on the Surveillance, Epidemiology, and End Results Program's population-based registries in Atlanta, Detroit, Seattle-Puget Sound, San Francisco-Oakland, Connecticut, Iowa, New Mexico, Utah, and Hawaii]

Site	All races			White			Black		
	1974–76	1977–79	1980–85	1974–76	1977–79	1980–85	1974–76	1977–79	1980–85
	Percent of patients								
Male									
All sites	40.5	42.5	44.2	41.6	43.8	45.6	31.0	31.8	32.7
Prostate gland	66.4	70.3	72.1	67.4	71.3	73.4	57.6	61.9	62.8
Lung and bronchus	10.9	11.6	11.6	10.9	11.9	11.7	10.8	8.8	10.4
Colon	49.2	51.1	54.7	49.6	51.4	55.0	43.4	45.2	46.9
Rectum	47.2	48.5	50.3	47.5	49.6	51.4	34.2	38.5	35.9
Urinary bladder	73.4	75.9	78.1	74.3	76.3	78.7	53.5	61.2	59.6
Oral cavity and pharynx	51.8	50.3	49.7	54.0	52.6	52.9	30.8	30.6	25.5
Stomach	13.6	15.0	15.5	12.8	14.2	14.2	15.6	14.3	18.1
Esophagus	3.6	4.5	6.6	4.3	5.3	7.4	2.2	2.3	4.7
Leukemia	32.4	34.4	33.2	32.9	35.1	34.5	31.1	29.9	25.2
Non-Hodgkin's lymphoma	46.8	45.0	48.4	47.5	45.6	49.5	43.5	41.1	38.7
Pancreas	3.0	2.1	2.8	3.2	2.0	2.7	1.1	2.8	3.6
Female									
All sites	56.3	55.4	55.2	57.1	56.2	56.1	46.5	45.7	44.3
Breast	74.0	74.0	75.4	74.6	74.7	76.3	62.6	62.2	63.5
Colon	50.2	53.2	54.8	50.4	53.3	55.3	46.4	49.0	48.6
Rectum	49.1	50.4	53.9	49.4	51.0	54.6	48.2	37.9	42.9
Lung and bronchus	15.4	16.7	15.5	15.6	16.8	15.7	12.9	16.6	14.7
Corpus uteri	88.1	85.1	81.9	89.0	86.5	83.4	62.2	57.1	52.0
Ovary	36.4	37.7	38.6	36.1	37.2	38.4	40.8	39.1	38.3
Cervix uteri	68.2	67.3	66.0	69.0	68.4	66.9	63.0	61.4	59.3
Pancreas	2.4	2.4	3.1	2.3	2.2	2.6	3.4	4.6	6.2
Non-Hodgkin's lymphoma	47.0	50.0	52.1	47.1	49.9	52.4	52.7	58.4	50.9
Melanoma of skin	84.0	84.9	86.5	84.1	85.3	86.6	---	---	*77.6

*Standard error is greater than 10 percentage points.

NOTES: Rates are based on follow up of patients through 1986. The rate is the ratio of the observed survival rate for the patient group to the expected survival rate for persons in the general population similar to the patient group with respect to age, sex, race, and calendar year of observation. It estimates the chance of surviving the effects of cancer.

SOURCE: National Cancer Institute, National Institutes of Health, *1988 Annual Cancer Statistics Review, Including a Report on the Status of Cancer Control*. NIH Pub. No. 89-2789. U.S. Department of Health and Human Services. Public Health Service. Bethesda, Md., 1989; National Cancer Institute, Division of Cancer Prevention and Control: Unpublished data.

Table 48. Limitation of activity caused by chronic conditions, according to selected characteristics: United States, 1983 and 1987

[Data are based on household interviews of a sample of the civilian noninstitutionalized population]

Characteristic	Total with limitation of activity		Limited but not in major activity		Limited in amount or kind of major activity		Unable to carry on major activity	
	1983	1987	1983	1987	1983	1987	1983	1987
	Percent of population							
Total[1,2]	13.8	12.9	4.1	4.0	6.0	5.2	3.6	3.7
Age								
Under 15 years	4.8	4.7	1.3	1.3	3.1	3.0	0.4	0.4
Under 5 years	2.1	2.1	0.5	0.7	1.1	1.0	0.5	0.5
5–14 years	6.2	6.2	1.8	1.7	4.1	4.1	0.3	0.4
15–44 years	8.5	8.1	2.7	2.6	3.9	3.4	1.9	2.0
45–64 years	24.3	22.3	5.9	5.6	10.2	8.2	8.2	8.5
65 years and over	40.2	37.5	14.8	14.7	15.0	12.9	10.4	10.0
65–74 years	37.6	34.7	13.5	12.8	13.3	11.3	10.7	10.7
75 years and over	44.4	41.9	16.8	17.7	17.7	15.4	9.9	8.9
Sex[1]								
Male	13.9	12.9	3.8	3.8	5.6	4.8	4.6	4.3
Female	13.6	12.8	4.5	4.2	6.4	5.5	2.7	3.1
Race[1]								
White	13.4	12.7	4.2	4.1	5.9	5.2	3.3	3.4
Black	17.5	16.0	3.8	3.5	7.5	6.2	6.2	6.2
Family income[1]								
Less than $10,000	23.0	23.9	5.4	5.2	9.6	9.2	8.0	9.4
$10,000–$14,999	16.6	17.4	4.5	4.5	6.8	6.9	5.2	6.0
$15,000–$19,999	14.4	13.9	4.3	4.0	6.6	5.6	3.5	4.3
$20,000–$34,999	11.0	11.2	3.7	3.7	5.1	4.8	2.1	2.7
$35,000 or more	9.4	8.9	3.7	3.6	4.1	3.7	1.6	1.6
Geographic region[1]								
Northeast	13.0	11.4	4.0	3.8	5.4	4.3	3.6	3.3
Midwest	13.1	12.8	3.9	3.9	5.9	5.5	3.2	3.5
South	14.7	14.0	4.1	4.1	6.7	5.8	3.9	4.0
West	14.2	12.7	4.7	4.2	5.8	4.8	3.7	3.7
Location of residence[1]								
Within MSA	13.5	12.4	4.1	3.9	5.9	5.0	3.5	3.6
Outside MSA	14.4	14.4	4.2	4.5	6.4	5.9	3.8	4.0

[1]Age adjusted.
[2]Includes all other races not shown separately and unknown family income.

SOURCE: Division of Health Interview Statistics, National Center for Health Statistics: Data from the National Health Interview Survey.

Table 49. Disability days associated with acute conditions and incidence of acute conditions, according to age: United States, 1982–87

[Data are based on household interviews of a sample of the civilian noninstitutionalized population]

Age	1982	1983	1984	1985	1986	1987
				Number per person		
Restricted-activity days						
All ages[1]	6.5	7.2	7.4	6.8	7.7	6.8
Under 15 years	7.0	8.2	7.9	6.9	8.2	7.5
Under 5 years	7.2	9.5	8.8	7.5	9.0	9.4
5–14 years	6.8	7.5	7.4	6.7	7.8	6.6
15–44 years	6.2	6.6	7.1	6.5	7.0	6.5
45–64 years	5.9	6.3	6.6	6.0	7.0	6.1
65 years and over	7.4	9.2	9.1	9.6	10.2	8.0
65–74 years	7.0	8.7	8.3	8.9	10.2	8.2
75 years and over	7.9	10.1	10.2	10.9	10.1	7.7
Bed-disability days[2]						
All ages[1]	3.0	3.4	3.3	3.1	3.4	3.0
Under 15 years	3.3	4.0	3.6	3.4	3.8	3.4
Under 5 years	3.7	4.7	3.8	3.5	3.9	4.4
5–14 years	3.1	3.6	3.5	3.3	3.8	2.8
15–44 years	2.9	3.0	3.2	2.8	3.1	2.8
45–64 years	2.5	2.8	2.6	2.7	3.1	2.6
65 years and over	3.3	4.5	3.9	3.9	4.6	3.4
65–74 years	3.1	4.4	3.7	2.8	3.9	3.7
75 years and over	3.6	4.7	4.3	5.7	5.5	3.0
				Number per 100 persons		
Incidence of acute conditions[3]						
All ages[1]	174.6	182.9	184.9	183.1	189.5	180.8
Under 15 years	271.1	288.1	289.3	280.0	302.7	281.7
Under 5 years	326.3	354.5	345.1	334.6	360.4	358.9
5–14 years	242.9	252.8	259.2	250.9	271.7	240.4
15–44 years	160.1	165.1	172.2	170.1	180.5	168.7
45–64 years	106.7	109.3	104.4	112.9	125.1	101.4
65 years and over	92.1	100.9	98.8	98.4	119.5	100.4
65–74 years	97.3	103.1	97.4	98.9	118.2	94.8
75 years and over	83.4	97.3	101.0	97.7	121.5	109.4

[1]Age adjusted.
[2]A subset of restricted-activity days.
[3]Excludes conditions involving neither medical attention nor activity restriction.

SOURCE: Division of Health Interview Statistics, National Center for Health Statistics: Data from the National Health Interview Survey.

Table 50. Self-assessment of health, according to selected characteristics: United States, 1983 and 1987

[Data are based on household interviews of a sample of the civilian noninstitutionalized population]

Characteristic	Total	Excellent		Very good		Good		Fair or poor	
		1983	1987	1983	1987	1983	1987	1983	1987
	Percent distribution								
Total[1,2]	100.0	40.7	40.3	25.4	27.8	23.2	22.4	10.7	9.5
Age									
Under 15 years	100.0	53.3	53.9	24.9	27.2	18.8	16.5	3.0	2.4
Under 5 years	100.0	54.0	54.0	25.1	27.4	18.0	16.1	2.9	2.6
5–14 years	100.0	52.9	53.9	24.8	27.1	19.3	16.8	3.1	2.3
15–44 years	100.0	44.7	43.2	27.9	30.5	21.5	20.9	6.0	5.4
45–64 years	100.0	26.6	27.3	24.0	26.5	29.3	28.8	20.1	17.4
65 years and over	100.0	16.6	15.4	19.2	20.9	30.8	32.9	33.3	30.8
65–74 years	100.0	16.9	16.7	19.1	21.6	31.7	33.5	32.3	28.2
75 years and over	100.0	16.2	13.4	19.4	19.9	29.4	31.9	34.9	34.9
Sex[1]									
Male	100.0	43.0	42.6	25.0	27.4	21.8	21.0	10.2	9.0
Female	100.0	38.6	38.2	25.7	28.2	24.6	23.7	11.1	9.9
Race[1]									
White	100.0	42.6	42.1	25.8	28.2	22.1	21.1	9.6	8.5
Black	100.0	28.5	29.5	21.8	24.4	30.0	29.4	19.7	16.7
Family income[1]									
Less than $10,000	100.0	29.1	26.4	22.1	24.1	27.6	28.9	21.2	20.5
$10,000–$14,999	100.0	34.2	31.9	24.8	26.9	27.2	27.1	13.9	14.1
$15,000–$19,999	100.0	37.0	34.7	26.9	28.1	25.7	26.3	10.5	11.0
$20,000–$34,999	100.0	43.7	41.1	27.4	29.2	22.0	22.7	6.9	7.1
$35,000 or more	100.0	53.1	50.9	26.2	28.0	16.1	16.3	4.7	4.7
Geographic region[1]									
Northeast	100.0	41.7	40.3	26.5	30.9	22.7	21.0	9.1	7.9
Midwest	100.0	40.9	41.8	26.5	27.4	22.9	22.1	9.7	8.8
South	100.0	38.3	37.3	24.0	26.8	24.7	24.3	13.1	11.7
West	100.0	43.5	43.8	25.0	26.9	22.0	21.2	9.5	8.2
Location of residence[1]									
Within MSA	100.0	41.5	41.5	25.8	27.6	22.7	21.8	10.0	9.0
Outside MSA	100.0	39.1	36.5	24.4	28.2	24.6	24.5	12.0	10.8

[1]Age adjusted.
[2]Includes all other races not shown separately and unknown family income.

SOURCE: Division of Health Interview Statistics, National Center for Health Statistics: Data from the National Health Interview Survey.

Table 51. Cigarette smoking by persons 20 years of age and over, according to sex, race, and age: United States, 1965, 1976, 1983, and 1987

[Data are based on household interviews of a sample of the civilian noninstitutionalized population]

Sex, race, and age	Current smoker[1]				Former smoker			
	1965	1976	1983	1987	1965	1976	1983	1987
	Percent of persons							
Male								
20 years and over, age adjusted	52.1	41.6	35.4	31.5	20.3	29.6	31.1	31.4
20 years and over, crude	52.4	41.9	35.7	31.7	20.5	28.9	29.5	30.1
20–24 years	59.2	45.9	36.9	31.1	9.0	12.2	9.1	7.8
25–34 years	60.7	48.5	38.8	34.8	14.7	18.3	19.8	17.4
35–44 years	58.2	47.6	41.0	36.6	20.6	27.3	27.5	28.1
45–64 years	51.9	41.3	35.9	33.5	24.1	37.1	40.1	40.1
65 years and over	26.5	23.0	22.0	17.2	28.1	44.4	48.1	53.4
White:								
20 years and over, age adjusted	51.3	41.0	34.7	30.7	21.2	30.7	32.0	32.6
20–44 years	58.5	46.8	38.8	34.3	16.9	20.5	20.5	20.4
20–24 years	58.1	45.3	36.1	31.6	9.6	13.3	9.7	8.3
25–34 years	60.1	47.7	38.6	33.8	15.5	18.9	20.5	18.1
35–44 years	57.3	46.8	40.8	36.2	21.5	28.9	27.8	29.3
45 years and over	44.4	35.0	30.1	26.3	26.1	40.5	44.1	46.6
45–64 years	51.3	40.6	35.0	32.4	25.1	38.1	41.2	41.6
65 years and over	27.7	22.8	20.6	16.0	28.7	45.6	49.9	55.1
Black:								
20 years and over, age adjusted	59.6	50.1	42.6	40.3	12.6	20.2	23.2	22.2
20–44 years	67.7	57.4	41.8	41.3	8.3	10.2	15.4	12.9
45 years and over	52.3	42.3	42.9	39.5	17.0	30.0	30.6	32.0
Female								
20 years and over, age adjusted	34.2	32.5	29.9	27.0	8.2	13.9	16.4	18.0
20 years and over, crude	34.1	32.0	29.4	26.8	8.2	13.8	16.2	17.9
20–24 years	41.9	34.2	37.5	28.1	7.3	10.4	10.8	10.5
25–34 years	43.7	37.5	32.6	31.8	9.9	12.9	13.8	15.6
35–44 years	43.7	38.2	33.8	29.6	9.6	15.8	17.1	19.4
45–64 years	32.0	34.8	31.0	28.6	8.6	15.9	18.6	20.7
65 years and over	9.6	12.8	13.1	13.7	4.5	11.7	18.7	19.8
White:								
20 years and over, age adjusted	34.5	32.4	29.8	27.3	8.5	14.6	17.2	18.9
20–44 years	43.3	36.8	34.3	30.5	9.6	14.2	15.2	17.2
20–24 years	41.9	34.4	37.5	29.4	8.0	11.4	11.6	11.5
25–34 years	43.4	37.1	32.2	31.9	10.3	13.7	15.1	16.9
35–44 years	43.9	38.1	34.8	29.2	9.9	17.0	18.0	20.6
45 years and over	25.1	26.7	23.6	22.7	7.4	14.6	19.2	20.9
45–64 years	32.7	34.7	30.6	29.0	8.8	16.4	19.0	21.4
65 years and over	9.8	13.2	13.2	14.0	4.5	11.5	19.5	20.2
Black:								
20 years and over, age adjusted	32.7	34.7	32.5	27.9	5.9	10.2	10.7	13.2
20–44 years	45.0	40.1	36.2	32.7	5.9	8.1	7.7	8.9
45 years and over	20.6	28.3	28.1	22.7	6.0	12.4	13.4	17.4

[1]A current smoker is a person who has smoked at least 100 cigarettes and who now smokes; includes occasional smokers.

NOTE: Excludes unknown smoking status.

SOURCE: Division of Health Interview Statistics, National Center for Health Statistics: Data from the National Health Interview Survey. Data computed by the Division of Epidemiology and Health Promotion from data compiled by the Division of Health Interview Statistics.

Table 52. Use of selected[1] substances in the past month by youths 12–17 years of age and young adults 18–25 years of age, according to age and sex: United States, selected years 1972–85

[Data are based on household interviews of a sample of the population 12 years of age and over in the coterminous United States]

Substance, age, and sex	1972	1974	1976	1977	1979	1982	1985
				Percent of population			
Cigarettes							
Both sexes:							
12–17 years	(2)	25	23	22	(2)	15	15
12–13 years	(2)	13	11	10	(2)	*3	6
14–15 years	(2)	25	20	22	(2)	10	14
16–17 years	(2)	38	39	35	(2)	30	25
18–25 years	(2)	49	49	47	(2)	40	37
Male:							
12–17 years	(2)	27	21	23	(2)	16	16
18–25 years	(2)	50	48	50	(2)	37	38
Female:							
12–17 years	(2)	24	26	22	(2)	13	15
18–25 years	(2)	47	51	44	(2)	42	35
Alcohol[3]							
Both sexes:							
12–17 years	(2)	34	32	31	37	27	31
12–13 years	(2)	19	19	13	20	10	11
14–15 years	(2)	32	31	28	36	23	35
16–17 years	(2)	51	47	52	55	45	46
18–25 years	(2)	69	69	70	76	68	71
Male:							
12–17 years	(2)	39	36	37	39	27	34
18–25 years	---	---	79	82	84	75	78
Female:							
12–17 years	(2)	29	29	25	36	27	28
18–25 years	---	---	58	59	68	61	64
Marijuana							
Both sexes:							
12–17 years	7	12	12	17	17	12	12
12–13 years	*1	*2	*3	*4	4	*2	*4
14–15 years	6	12	13	16	17	8	11
16–17 years	16	20	21	30	28	23	21
18–25 years	28	25	25	27	35	27	22
Male:							
12–17 years	9	12	14	20	19	13	13
18–25 years	---	---	31	35	45	36	27
Female:							
12–17 years	6	11	11	13	14	10	11
18–25 years	---	---	19	20	26	19	17
Cocaine							
Both sexes:							
12–17 years	*0.6	*1.0	*1.0	*0.8	1.4	1.6	1.5
18–25 years	---	3.1	2.0	3.7	9.3	6.8	7.6
Male:							
12–17 years	---	---	---	---	---	1.8	2.0
18–25 years	---	---	---	---	---	9.1	9.0
Female:							
12–17 years	---	---	---	---	---	*1.5	*1.0
18–25 years	---	---	---	---	---	4.7	6.3

[1]Data not comparable because definitions differ.
[2]In 1979, 1982, and 1985, private answer sheets were used for alcohol questions; in earlier years, respondents answered questions aloud.

*Relative standard error greater than 30 percent.

SOURCES: National Institute on Drug Abuse: *National Household Survey on Drug Abuse: Main Findings, 1979*, by P. M. Fishburne, H. I. Abelson, and I. Cisin. DHHS Pub. No. (ADM) 80-976. Alcohol, Drug Abuse, and Mental Health Administration. Washington. U.S. Government Printing Office, 1980; *National Household Survey on Drug Abuse: Main Findings, 1982*, by J. D. Miller et al. DHHS Pub. No. (ADM) 83-1263. Alcohol, Drug Abuse, and Mental Health Administration. Washington. U.S. Government Printing Office, 1983; *National Household Survey on Drug Abuse: Main Findings, 1985*. DHHS Pub. No. (ADM) 86-1586. National Institute on Drug Abuse, 1986; Unpublished data.

Table 53. Alcohol consumption status of persons 18 years of age and over, according to sex: United States, selected years 1971–85

[Data are based on interviews of samples of the noninstitutionalized population]

Sex and alcohol consumption	1971	1973	1974	1975	1976	1979	1983	1985
				Percent distribution				
Both sexes								
Abstain	36	34	36	36	33	33	40	35
Light	34	29	28	31	38	34	29	35
Moderate	20	23	28	21	19	24	21	22
Heavier	10	14	11	12	10	9	10	8
Male								
Abstain	30	25	24	27	26	25	28	24
Light	29	24	24	27	33	29	28	33
Moderate	26	29	34	26	24	31	28	29
Heavier	15	22	18	20	18	14	16	14
Female								
Abstain	42	42	42	45	39	40	50	45
Light	40	35	32	35	44	38	30	37
Moderate	13	17	21	15	15	18	15	15
Heavier	5	6	5	4	3	4	4	3

NOTE: Alcohol consumption status is defined in ounces of absolute alcohol (ethanol) consumed per day as follows: abstain, 0; light, .01–.21; moderate, .22–.99; and heavier, 1.00 or more.

SOURCES: Clark, W. B., Midanik, L., and Knupfer, G.: *Report on the 1979 National Survey*. University of California. Contract No. ADM 281-77-0021. Prepared for the National Institute on Alcohol Abuse and Alcoholism. Rockville, Md., Dec. 1981. Data for 1983 and 1985 computed by the National Institute on Alcohol Abuse and Alcoholism from data compiled by the National Center for Health Statistics, Division of Health Interview Statistics.

Table 54. Borderline or definite elevated blood pressure for persons 25–74 years of age, according to race, sex, and age: United States, 1960–62, 1971–74, and 1976–80

[Data are based on physical examinations of a sample of the civilian noninstitutionalized population]

Sex and age	All races			White			Black		
	1960–62	1971–74	1976–80	1960–62	1971–74	1976–80	1960–62	1971–74	1976–80
	Percent of population								
Both sexes									
Age adjusted, 25–74 years	41.0	42.1	41.3	39.6	40.8	40.1	53.8	55.1	51.3
25–34 years	15.6	19.6	20.8	14.7	18.8	20.7	22.4	28.2	22.4
35–44 years	29.8	32.2	33.0	28.1	29.6	30.8	43.5	54.5	47.9
45–54 years	44.4	46.9	47.1	42.4	45.8	45.9	60.6	57.4	58.9
55–64 years	62.3	59.4	56.7	60.9	58.4	55.2	78.8	71.8	70.5
65–74 years	73.8	70.3	63.1	73.1	69.3	61.9	85.2	80.0	71.7
Male									
Age adjusted, 25–74 years	43.7	46.1	46.6	42.8	45.4	45.9	53.6	55.9	52.8
25–34 years	23.3	27.5	31.2	22.3	27.2	31.5	31.9	33.6	31.5
35–44 years	37.4	38.1	39.5	37.0	36.0	37.6	44.2	60.5	53.8
45–54 years	47.2	52.8	52.1	46.0	53.0	52.0	56.3	53.3	50.9
55–64 years	59.3	59.3	58.6	58.3	58.9	57.6	74.8	67.5	71.7
65–74 years	65.9	65.4	62.0	65.0	64.0	60.6	*76.8	79.3	68.7
Female									
Age adjusted, 25–74 years	38.4	38.4	36.2	36.5	36.4	34.6	54.7	54.6	50.1
25–34 years	8.6	12.3	11.0	7.6	10.8	10.4	16.1	24.2	15.1
35–44 years	22.7	26.7	27.0	19.8	23.6	24.6	43.0	49.9	43.4
45–54 years	41.8	41.5	42.3	39.1	39.1	40.1	64.8	61.0	65.8
55–64 years	65.0	59.5	55.0	63.3	57.9	53.1	82.8	75.3	69.4
65–74 years	80.3	74.*	63.9	79.8	73.4	63.0	*92.1	80.6	74.0

*Based on fewer than 45 persons.

NOTE: Borderline or definite elevated blood pressure is defined as either systolic pressure of at least 140 mmHg or diastolic pressure of at least 90 mmHg or both based on a single measurement.

SOURCE: Division of Health Examination Statistics, National Center for Health Statistics: Unpublished data.

Table 55. Definite elevated blood pressure for persons 25–74 years of age, according to race, sex, and age: United States, 1960–62, 1971–74, and 1976–80

[Data are based on physical examinations of a sample of the civilian noninstitutionalized population]

Sex and age	All races			White			Black		
	1960–62	1971–74	1976–80	1960–62	1971–74	1976–80	1960–62	1971–74	1976–80
	Percent of population								
Both sexes									
Age adjusted, 25–74 years	20.9	21.7	20.1	19.2	20.1	19.2	36.8	36.6	27.7
25–34 years	5.3	6.7	7.7	4.2	6.0	7.6	14.0	12.9	9.2
35–44 years	13.3	15.5	13.9	11.4	13.5	12.5	28.7	31.9	24.3
45–54 years	21.4	24.3	25.3	19.2	22.2	24.2	39.5	43.7	36.6
55–64 years	31.8	33.2	28.1	30.1	31.6	26.9	50.1	52.1	39.5
65–74 years	48.7	40.9	34.5	46.9	39.5	34.0	71.9	55.7	36.6
Male									
Age adjusted, 25–74 years	20.7	22.9	23.0	19.0	21.7	22.3	36.3	35.8	29.7
25–34 years	7.8	8.9	12.2	6.1	8.3	12.2	21.8	16.1	13.4
35–44 years	16.2	19.1	16.9	14.9	17.2	15.2	28.1	36.8	33.2
45–54 years	21.4	26.8	26.5	19.6	25.8	26.6	34.6	37.0	29.3
55–64 years	29.3	32.5	31.1	27.5	31.2	29.7	49.7	49.5	45.7
65–74 years	40.5	36.4	33.3	38.6	35.1	32.7	*63.3	50.3	32.1
Female									
Age adjusted, 25–74 years	21.0	20.4	17.4	19.2	18.5	16.3	37.7	37.4	26.2
25–34 years	3.1	4.6	3.6	2.3	3.8	3.2	8.8	10.7	5.8
35–44 years	10.6	12.1	11.1	8.2	9.9	9.9	29.2	28.2	17.4
45–54 years	21.5	21.9	22.4	18.8	18.8	20.1	44.3	49.4	42.9
55–64 years	34.1	33.9	25.3	32.5	32.0	24.4	50.5	54.2	34.2
65–74 years	55.4	44.4	35.5	53.8	42.9	35.0	*79.0	59.8	40.0

*Based on fewer than 45 persons.

NOTE: Definite elevated blood pressure is defined as either systolic pressure of at least 160 mmHg or diastolic pressure of at least 95 mmHg or both based on a single measurement.

SOURCE: Division of Health Examination Statistics, National Center for Health Statistics: Unpublished data.

Table 58. High-risk serum cholesterol levels for persons 25–74 years of age, according to race, sex, and age: United States, 1960–62, 1971–74, and 1976–80

[Data are based on physical examinations of a sample of the civilian noninstitutionalized population]

Sex and age	All races			White			Black		
	1960–62	1971–74	1976–80	1960–62	1971–74	1976–80	1960–62	1971–74	1976–80
	Percent of population								
Both sexes									
Age adjusted, 25–74 years	26.9	23.2	21.9	27.6	23.2	21.9	22.1	23.7	22.8
25–34 years	20.4	19.9	18.7	20.9	19.8	18.5	19.0	20.6	19.7
35–44 years	21.2	17.5	16.8	22.0	17.3	16.6	14.5	18.2	18.8
45–54 years	26.4	24.2	22.0	26.8	24.4	21.8	25.5	24.1	25.5
55–64 years	36.0	27.9	29.0	37.8	28.0	29.3	20.9	29.3	27.5
65–74 years	37.3	31.3	27.2	37.4	31.5	27.7	38.0	31.1	24.0
Male									
Age adjusted, 25–74 years	24.1	22.1	20.1	25.1	22.0	20.1	17.1	22.7	23.4
25–34 years	23.6	22.7	19.2	24.7	22.8	18.7	16.3	22.3	24.8
35–44 years	26.3	22.6	20.5	27.7	22.2	20.1	13.4	23.7	24.5
45–54 years	25.3	24.1	20.1	26.1	24.6	20.8	21.1	20.4	25.3
55–64 years	22.8	19.5	22.0	23.9	19.3	22.4	13.7	23.0	22.1
65–74 years	20.8	19.9	18.1	20.7	19.5	18.4	*22.9	25.8	16.6
Female									
Age adjusted, 25–74 years	29.3	24.0	23.3	29.7	23.9	23.4	26.8	24.6	22.3
25–34 years	17.5	17.2	18.2	17.3	16.9	18.4	20.8	19.4	15.6
35–44 years	16.5	12.9	13.4	16.7	12.7	13.3	15.5	14.1	14.3
45–54 years	27.4	24.3	22.9	27.5	24.1	22.7	29.9	27.2	25.8
55–64 years	48.5	35.5	35.3	50.6	35.8	35.6	*29.1	34.4	32.0
65–74 years	50.8	40.0	34.3	51.2	40.6	34.8	*50.1	35.1	29.5

*Based on fewer than 45 persons.

NOTES: High-risk serum cholesterol levels are defined by age-specific cut points of the cholesterol distribution: 20–29 years of age, greater than 220 milligrams/deciliter; 30–39 years of age, greater than 240 milligrams/deciliter; and 40 years of age and over, greater than 260 milligrams/deciliter. Risk levels defined by NIH Consensus Development conference statement on lowering blood cholesterol, Dec. 10, 1984.

SOURCE: Division of Health Examination Statistics, National Center for Health Statistics: Unpublished data.

Table 57. Overweight persons 25–74 years of age, according to race, sex, and age: United States, 1960–62, 1971–74, and 1976–80

[Data are based on physical examinations of a sample of the civilian noninstitutionalized population]

Sex and age	All races			White			Black		
	1960–62	1971–74	1976–80	1960–62	1971–74	1976–80	1960–62	1971–74	1976–80
	Percent of population								
Both sexes									
Age adjusted, 25–74 years	27.4	27.9	28.4	26.4	26.8	27.2	35.9	38.8	41.1
25–34 years	18.9	20.5	20.2	17.8	19.7	19.4	31.6	29.1	26.3
35–44 years	23.8	28.4	27.9	21.8	26.6	26.4	38.0	45.3	40.8
45–54 years	29.8	30.0	31.7	28.8	29.1	30.2	33.2	39.4	52.1
55–64 years	35.7	32.0	32.8	34.8	31.0	31.9	45.5	43.9	44.2
65–74 years	34.6	31.5	32.7	35.0	31.0	31.9	31.5	37.3	46.0
Male									
Age adjusted, 25–74 years	24.8	26.0	26.7	25.1	26.0	26.7	24.1	27.6	30.9
25–34 years	22.0	23.6	20.4	21.4	23.6	20.9	34.3	26.1	17.5
35–44 years	23.2	29.4	28.9	22.4	28.9	28.2	28.6	39.3	40.9
45–54 years	28.1	27.6	31.0	29.3	28.2	30.5	18.5	22.4	41.4
55–64 years	27.2	24.8	28.1	28.5	24.9	28.6	20.1	25.6	26.0
65–74 years	23.8	23.0	25.2	24.8	23.1	25.8	*11.7	21.6	26.4
Female									
Age adjusted, 25–74 years	29.6	29.4	29.8	27.3	27.4	27.5	47.3	47.8	49.5
25–34 years	15.9	17.6	20.0	13.9	15.9	17.9	29.6	31.5	33.5
35–44 years	24.4	27.3	27.0	21.2	24.5	24.8	46.1	49.9	40.8
45–54 years	30.9	32.3	32.5	28.5	29.9	29.9	47.8	53.5	61.2
55–64 years	43.6	38.5	37.0	40.5	36.6	34.8	71.4	58.7	59.4
65–74 years	43.3	38.0	38.5	43.2	37.0	36.5	*47.8	49.2	60.8

*Based on fewer than 45 persons.

NOTES: Overweight is defined for men as body mass index greater than or equal to 27.8 kilograms/meter^2, and for women as body mass index greater than or equal to 27.3 kilograms/meter^2. These cut points were used because they represent the sex-specific 95th percentiles for persons 20–29 years of age in the 1976–80 National Health and Nutrition Examination Survey. Excludes pregnant women.

SOURCE: Division of Health Examination Statistics, National Center for Health Statistics: Unpublished data.

Table 58. Air pollution, according to source and type of pollutant: United States, selected years 1970–86

[Data are calculated emissions estimates]

Type of pollutant and year	All sources	Transportation	Stationary fuel combustion	Industrial processes	Solid waste	Other
Particulate matter			Emissions in 10^6 metric tons per year			
1970	18.5	1.2	4.6	10.5	1.1	1.1
1975	10.6	1.3	2.8	5.2	0.6	0.7
1980	8.5	1.3	2.4	3.3	0.4	1.1
1983	7.1	1.3	2.0	2.4	0.3	1.1
1984	7.4	1.3	2.1	2.8	0.3	0.9
1985	7.0	1.4	1.8	2.8	0.3	0.8
1986	6.8	1.4	1.8	2.5	0.3	0.8
Sulfur oxides						
1970	28.4	0.6	21.3	6.4	(1)	0.1
1975	26.0	0.7	20.4	5.0	(1)	(1)
1980	23.9	0.9	19.3	3.8	(1)	(1)
1983	21.5	0.8	17.4	3.3	(1)	(1)
1984	22.1	0.8	17.9	3.3	(1)	(1)
1985	21.6	0.9	17.6	3.2	(1)	(1)
1986	21.2	0.9	17.2	3.1	(1)	(1)
Nitrogen oxides						
1970	18.1	7.6	9.1	0.7	0.4	0.3
1975	19.1	8.9	9.3	0.7	0.1	0.1
1980	20.3	9.2	10.1	0.7	0.1	0.2
1983	19.1	8.6	9.6	0.5	0.1	0.2
1984	19.7	8.7	10.2	0.6	0.1	0.2
1985	19.7	8.8	10.2	0.6	0.1	0.1
1986	19.3	8.5	10.0	0.6	0.1	0.1
Volatile organic compounds						
1970	27.5	12.4	1.1	8.9	1.8	3.3
1975	22.8	10.2	1.1	8.1	0.9	2.5
1980	23.0	8.2	2.2	9.2	0.6	2.9
1983	20.9	7.3	2.6	7.8	0.6	2.7
1984	21.9	7.3	2.6	8.7	0.6	2.7
1985	20.3	6.7	2.3	8.4	0.6	2.2
1986	19.5	6.5	2.3	7.9	0.6	2.2
Carbon monoxide						
1970	98.7	71.8	4.4	9.0	6.4	7.2
1975	81.0	62.0	4.2	6.9	3.1	4.8
1980	76.1	52.6	7.3	6.3	2.2	7.6
1983	70.3	48.3	7.9	4.4	1.9	7.7
1984	69.6	48.4	8.1	4.8	1.9	6.3
1985	64.3	45.2	7.5	4.6	2.0	5.3
1986	60.9	42.6	7.2	4.5	1.7	5.0
Lead			Emissions in 10^3 metric tons per year			
1970	203.8	163.6	9.6	23.9	6.7	(2)
1975	147.0	122.6	9.3	10.3	4.8	(2)
1980	70.6	59.4	3.9	3.6	3.7	(2)
1983	46.3	40.7	0.6	2.4	2.6	(2)
1984	40.1	34.7	0.5	2.3	2.6	(2)
1985	21.1	15.5	0.5	2.3	2.8	(2)
1986	8.6	3.5	0.5	1.9	2.7	(2)

[1] Emissions of less than 50,000 metric tons per year.
[2] No emissions calculated.

NOTE: Because of modifications in methodology and use of more refined emission factors, data from this table should not be compared with data in previous editions of *Health, United States*.

SOURCE: Office of Air Quality Planning and Standards, Technical Support Division, National Air Data Branch: *National Air Pollutant Emission Estimates, 1940–1986*. EPA-450/4-87-024. U.S. Environmental Protection Agency. Research Triangle Park, N.C., Jan. 1988.

Table 59. Employees with potential exposure to continuous noise without controls in selected industries, according to size of facility: United States, 1972–74 and 1981–83

[Data are based on interviews of a sample of nonagricultural businesses]

Industry	All facilities		8–99 employees		100–499 employees		500 or more employees	
	1972–74	1981–83	1972–74	1981–83	1972–74	1981–83	1972–74	1981–83
	Number of employees with potential exposure							
All industries	3,451,828	2,543,810	935,183	976,695	1,196,451	946,106	1,320,214	621,008
General building contractors	77,526	93,120	22,783	63,862	54,743	22,563	*–	*6,693
Heavy construction contractors	36,697	95,661	17,706	38,848	9,057	43,385	*9,933	*13,427
Special trade contractors	70,362	171,213	38,605	151,886	31,756	19,327	*–	---
Textile mill products	51,306	101,109	20,055	21,898	25,312	46,430	*5,938	32,780
Apparel and other textile products	131,850	122,264	77,077	19,898	54,300	73,380	*472	*28,987
Lumber and wood products	54,135	99,913	32,468	61,981	14,743	29,783	*8,923	*8,147
Paper and allied products	175,953	77,728	38,330	19,760	75,073	41,214	*62,549	16,753
Printing and publishing	120,275	116,221	36,600	43,960	16,805	36,081	66,869	34,179
Chemicals and allied products	48,037	42,329	14,569	12,036	25,749	21,281	7,718	9,011
Primary metals industries	414,976	132,726	35,585	17,135	88,711	55,683	290,679	59,907
Fabricated metal products	354,055	194,830	126,239	86,187	145,497	70,147	82,318	38,495
Machinery, except electrical	245,066	140,604	56,522	63,052	64,348	47,969	124,215	29,582
Miscellaneous manufacturing industries	71,039	22,038	20,442	8,793	32,232	13,244	*18,364	*–
Transportation by air	31,352	47,441	*946	13,034	6,665	*30,658	*23,740	3,749
Auto repair services and garages	17,861	33,820	17,301	33,114	*560	*706	---	---
Miscellaneous repair services	24,294	4,282	4,125	2,688	*17,304	*1,593	*2,865	---
Electric and electronic equipment	90,585	72,471	4,287	12,126	35,673	16,224	50,624	44,120
	Percent of employees with potential exposure							
All industries	9.0	7.6	6.1	8.8	10.8	9.6	11.1	5.0
General building contractors	11.1	10.4	7.6	11.3	14.7	11.4	*–	*5.0
Heavy construction contractors	6.7	16.1	6.0	13.7	3.8	20.9	*67.3	*13.3
Special trade contractors	5.5	10.8	4.1	12.1	9.5	5.8	*–	---
Textile mill products	22.1	14.2	21.7	20.7	26.2	13.4	*13.8	12.6
Apparel and other textile products	14.4	9.8	15.4	4.7	14.3	12.0	*1.2	*13.9
Lumber and wood products	33.9	17.2	39.6	20.4	28.9	16.2	*26.0	*8.8
Paper and allied products	30.8	12.4	30.3	14.4	28.3	14.6	*35.0	8.1
Printing and publishing	9.7	9.8	10.5	9.2	5.4	10.6	11.6	9.9
Chemicals and allied products	5.0	4.6	7.4	6.7	13.5	8.2	1.3	1.9
Primary metals industries	30.8	12.4	29.5	12.4	39.9	17.9	28.9	9.6
Fabricated metal products	26.2	13.0	28.3	15.5	28.1	11.8	21.3	11.0
Machinery, except electrical	15.9	5.9	21.1	10.4	17.4	7.3	13.8	2.7
Miscellaneous manufacturing industries	18.5	4.2	14.7	5.3	21.2	8.9	*19.7	*–
Transportation by air	6.1	10.5	*3.1	16.6	11.2	*28.0	*5.6	1.4
Auto repair services and garages	14.0	8.0	15.7	8.0	*3.3	*8.6	---	---
Miscellaneous repair services	13.2	2.1	2.7	1.5	*76.4	*6.5	*28.6	---
Electric and electronic equipment	6.0	3.7	4.3	5.3	10.7	2.9	4.7	3.7

*Based on fewer than 10 facilities.

SOURCE: National Institute for Occupational Safety and Health: Unpublished data from the 1972–74 National Occupational Hazard Survey and 1981–83 National Occupational Exposure Survey.

Table 60. Health and safety services in manufacturing industries, according to size of facility: United States, 1972–74 and 1981–83

[Data are based on interviews of a sample of nonagricultural businesses]

Health and safety services available in facility	All facilities		8–99 employees		100–499 employees		500 or more employees	
	1972–74	1981–83	1972–74[1]	1981–83	1972–74	1981–83	1972–74	1981–83
	Number in thousands							
Employees	38,263	33,218	15,394	11,078	10,883	9,856	11,985	12,283
Occupational health and safety practices	Percent of employees							
Regularly monitor environmental conditions[2]	21.7	48.0	2.5	11.1	12.0	43.4	55.5	85.1
Personal protective devices required in some work areas[3]	39.2	53.5	32.5	45.9	45.9	59.0	41.6	56.0
Employer provides protective devices	52.5	80.2	41.9	70.4	59.8	82.8	59.7	86.8
Medical facilities and practices								
Health unit at the facility	31.5	42.7	3.3	3.8	18.8	31.7	79.5	86.7
Access to physician or clinic	70.7	100.0	49.0	100.0	76.3	100.0	93.5	100.0
Preemployment medical exams	36.5	49.4	12.8	20.0	35.0	47.0	74.9	77.9
Periodic medical exams	14.4	30.1	3.0	8.4	13.4	26.4	26.1	52.7
Records of employee absenteeism showing type of illness	14.2	4.8	4.7	8.1	10.1	3.0	30.4	3.3

[1] Includes facilities with fewer than 8 employees.
[2] Monitoring environmental conditions such as presence of fumes, gases, dust, noise, vibration, radiation.
[3] Includes respirators, protective clothing, etc.

SOURCE: National Institute for Occupational Safety and Health: Unpublished data from the 1972–74 National Occupational Hazard Survey and 1981–83 National Occupational Exposure Survey.

Table 61. Physician contacts, according to place of contact and selected patient characteristics: United States, 1983 and 1987

[Data are based on household interviews of a sample of the civilian noninstitutionalized population]

Characteristic	Physician contacts		Place of contact									
				Doctor's office		Hospital outpatient department[1]		Telephone		Home		Other[2]	
	1983	1987	Total	1983	1987	1983	1987	1983	1987	1983	1987	1983	1987
	Number per person		Percent distribution										
Total[3,4]	5.1	5.4	100.0	56.1	57.1	14.9	14.1	15.5	13.4	1.5	2.1	12.0	13.4
Age													
Under 15 years	4.6	4.5	100.0	54.7	57.9	13.3	12.8	20.5	17.1	*0.3	*0.7	11.2	11.6
Under 5 years	6.9	6.7	100.0	54.2	57.6	13.2	13.0	21.0	18.3	*0.5	*0.6	11.1	10.5
5–14 years	3.3	3.3	100.0	55.3	58.2	13.4	12.6	20.0	15.6	*0.1	*0.8	11.2	12.7
15–44 years	4.4	4.6	100.0	54.9	56.4	16.5	14.5	14.3	12.3	0.6	0.7	13.7	16.1
45–64 years	5.8	6.4	100.0	59.0	56.9	15.3	15.3	12.5	12.2	1.8	3.6	11.4	12.1
65 years and over	7.6	8.9	100.0	59.2	57.8	12.4	13.8	11.9	9.9	7.9	8.6	8.7	9.9
65–74 years	7.3	8.4	100.0	60.7	59.1	14.2	14.7	11.4	9.3	3.4	6.3	10.3	10.7
75 years and over	8.2	9.7	100.0	56.9	55.9	9.8	12.7	12.7	10.7	14.3	11.9	6.3	8.8
Sex[3]													
Male	4.4	4.6	100.0	54.8	57.0	17.1	15.7	13.5	11.4	1.5	1.8	13.2	14.0
Female	5.7	6.0	100.0	56.8	56.9	13.6	13.1	16.8	14.7	1.5	2.3	11.2	13.0
Race[3]													
White	5.2	5.5	100.0	57.6	58.6	13.4	12.8	16.3	14.1	1.5	2.0	11.1	12.5
Black	4.9	5.1	100.0	44.3	47.2	26.8	23.5	9.7	7.8	1.1	3.1	18.2	18.3
Family income[3]													
Less than $10,000	5.9	6.8	100.0	49.9	43.8	18.5	19.2	12.4	12.8	1.5	3.9	17.7	20.3
$10,000–$14,999	5.0	5.6	100.0	52.3	51.1	17.6	17.8	13.0	13.4	2.0	1.7	15.1	16.0
$15,000–$19,999	4.7	5.2	100.0	54.5	54.7	16.7	16.8	16.4	12.6	1.3	1.8	11.1	14.1
$20,000–$34,999	5.0	5.2	100.0	59.3	59.6	13.3	12.6	16.2	14.9	0.7	1.3	10.5	11.5
$35,000 or more	5.4	5.4	100.0	59.7	62.3	11.6	11.2	19.0	13.8	1.1	1.7	8.6	11.1
Geographic region[3]													
Northeast	4.9	5.2	100.0	58.3	56.5	15.6	15.8	14.1	12.5	1.8	3.5	10.2	11.6
Midwest	5.2	5.6	100.0	53.5	53.2	14.7	14.5	17.2	15.6	1.2	1.7	13.5	15.0
South	4.8	5.1	100.0	56.9	61.1	14.5	12.6	15.7	12.3	1.9	2.2	11.1	11.9
West	5.4	5.5	100.0	56.0	56.4	15.3	14.4	14.5	13.4	0.8	0.7	13.3	15.1
Location of residence[3]													
Within MSA	5.2	5.5	100.0	54.9	55.7	15.7	14.6	16.0	13.8	1.3	2.1	12.2	13.7
Outside MSA	4.8	4.8	100.0	59.1	62.1	13.2	12.0	14.5	12.1	1.9	1.7	11.4	12.1

[1] Includes hospital outpatient clinic, emergency room, and other hospital contacts.
[2] Includes clinics or other places outside a hospital.
[3] Age adjusted.
[4] Includes all other races not shown separately and unknown family income.

*Relative standard error greater than 30 percent.

NOTE: In previous editions of *Health, United States*, physician contacts were labeled physician visits.

SOURCE: Division of Health Interview Statistics, National Center for Health Statistics: Data from the National Health Interview Survey.

Table 62. Interval since last physician contact, according to selected patient characteristics: United States, 1964, 1982, and 1987

[Data are based on household interviews of a sample of the civilian noninstitutionalized population]

Characteristic	Total	Less than 1 year			1 year–less than 2 years			2 years or more[1]		
		1964	1982	1987	1964	1982	1987	1964	1982	1987
	Percent distribution									
Total[2,3]	100.0	66.9	75.8	76.6	14.0	11.0	10.6	19.1	13.2	12.8
Age										
Under 15 years	100.0	68.4	79.7	81.6	14.8	11.8	11.2	16.7	8.5	7.3
Under 5 years	100.0	80.7	91.8	93.0	11.1	6.3	5.6	8.2	1.9	1.4
5–14 years	100.0	61.7	73.5	75.5	16.9	14.7	14.1	21.4	11.8	10.4
15–44 years	100.0	66.3	72.2	72.0	15.0	12.4	12.0	18.7	15.4	16.0
45–64 years	100.0	64.5	74.4	74.9	13.0	9.4	9.3	22.5	16.2	15.7
65 years and over	100.0	69.7	82.1	85.0	9.3	5.8	5.5	21.0	12.0	9.5
65–74 years	100.0	68.8	80.2	83.2	9.4	6.4	5.8	21.8	13.4	11.0
75 years and over	100.0	71.3	85.4	87.8	9.3	4.8	5.1	19.5	9.8	7.1
Sex[2]										
Male	100.0	63.5	71.2	71.9	15.0	12.1	11.5	21.5	16.7	16.6
Female	100.0	69.9	80.0	81.0	13.1	10.0	9.7	17.0	10.0	9.3
Race[2]										
White	100.0	68.1	76.1	77.1	13.8	10.8	10.4	18.1	13.1	12.6
Black[4]	100.0	58.3	74.9	75.1	15.1	12.4	11.8	26.6	12.7	13.1
Family income[2,5]										
Less than $10,000	100.0	58.6	77.3	77.4	13.2	10.2	9.8	28.2	12.5	12.8
$10,000–$14,999	100.0	62.5	74.9	74.1	14.2	11.2	11.0	23.3	13.9	14.9
$15,000–$19,999	100.0	66.8	73.6	73.6	14.5	11.6	11.5	18.7	14.9	14.9
$20,000–$34,999	100.0	70.2	75.0	76.6	14.0	11.3	10.4	15.7	13.7	12.9
$35,000 or more	100.0	73.6	78.0	79.4	12.9	10.3	9.8	13.5	11.8	10.8
Geographic region[2]										
Northeast	100.0	68.0	78.5	78.4	14.1	9.9	10.8	17.9	11.7	10.9
Midwest	100.0	66.6	75.7	78.0	14.2	11.0	9.7	19.2	13.3	12.2
South	100.0	65.2	74.4	75.0	13.9	11.9	11.3	20.9	13.7	13.7
West	100.0	69.0	75.3	75.9	13.7	10.6	10.2	17.3	14.2	13.9
Location of residence[2]										
Within MSA	100.0	68.2	76.9	77.3	14.0	10.6	10.3	17.8	12.5	12.3
Outside MSA	100.0	64.0	73.4	74.3	14.1	11.8	11.3	21.9	14.9	14.4

[1] Includes persons who never visited a physician.
[2] Age adjusted.
[3] Includes all other races not shown separately and unknown family income.
[4] 1964 data include all other races.
[5] Family income categories for 1987. Income categories in 1964 are: less than $2,000; $2,000–$3,999; $4,000–$6,999; $7,000–$9,999; and $10,000 or more; and, in 1982 are: less than $7,000; $7,000–$9,999; $10,000–$14,999; $15,000–$24,999; and $25,000 or more.

NOTE: In previous editions of *Health, United States*, physician contacts were labeled physician visits.

SOURCE: Division of Health Interview Statistics, National Center for Health Statistics: Data from the National Health Interview Survey.

Table 63. Office visits to physicians, according to physician specialty and selected patient characteristics: United States, 1980 and 1985

[Data are based on reporting by a sample of office-based physicians]

Characteristic	All specialties[1]		General and family practice		Internal medicine		Obstetrics and gynecology		Pediatrics		General surgery	
	1980	1985	1980	1985	1980	1985	1980	1985	1980	1985	1980	1985
	Visits per person											
Total[2]	2.63	2.71	0.86	0.81	0.30	0.30	0.23	0.22	0.37	0.40	0.13	0.12
Age												
Under 15 years	2.21	2.31	0.54	0.58	0.03	0.05	0.01	0.01	1.20	1.28	0.05	0.03
15–44 years	2.36	2.28	0.81	0.75	0.20	0.19	0.48	0.44	0.04	0.06	0.12	0.10
45–64 years	2.99	3.10	1.08	0.99	0.58	0.49	0.12	0.15	0.01	0.01	0.20	0.21
65 years and over	4.22	4.85	1.56	1.41	0.95	1.07	0.06	0.07	0.01	0.01	0.22	0.30
65–74 years	4.01	4.54	1.49	1.31	0.89	1.00	0.06	0.09	0.00	0.00	0.23	0.29
75 years and over	4.58	5.35	1.70	1.57	1.06	1.18	0.05	0.04	0.01	0.01	0.20	0.32
Sex[2]												
Male	2.25	2.28	0.73	0.68	0.28	0.25	0.01	0.00	0.39	0.38	0.12	0.11
Female	2.98	3.11	0.98	0.94	0.33	0.33	0.44	0.42	0.34	0.42	0.13	0.14
Race[2]												
White	2.73	2.84	0.89	0.84	0.31	0.31	0.23	0.22	0.39	0.43	0.13	0.12
All other	2.03	1.94	0.70	0.60	0.24	0.21	0.23	0.18	0.25	0.23	0.08	0.11

[1] Includes other specialties not shown separately.
[2] Age adjusted.

NOTE: Rates are based on the civilian noninstitutionalized population, excluding Alaska and Hawaii.

SOURCE: Division of Health Care Statistics, National Center for Health Statistics: Data from the National Ambulatory Medical Care Survey.

Table 64. Office visits to physicians, according to selected patient characteristics: United States, 1980 and 1985

[Data are based on reporting by a sample of office-based physicians]

Characteristic	Patient's first visit		Visit lasted 10 minutes or less[1]		Return visit scheduled	
	1980	1985	1980	1985	1980	1985
	Percent of visits					
Total[2]	15.3	17.7	47.3	42.6	58.0	58.8
Age						
Under 15 years	14.6	17.8	57.5	50.8	48.8	49.2
15–44 years	18.7	20.8	46.9	41.6	58.2	58.9
45–64 years	12.7	14.8	38.9	36.3	64.5	65.6
65 years and over	8.6	10.5	36.7	35.6	71.3	72.8
65–74 years	8.9	11.2	38.0	34.6	70.5	72.6
75 years and over	8.3	9.6	35.1	36.9	72.6	73.1
Sex[2]						
Male	17.3	19.5	46.4	43.3	55.9	56.7
Female	14.4	16.9	47.7	42.2	58.9	59.8
Race[2]						
White	14.9	17.4	47.3	42.3	57.8	58.4
All other	18.9	20.1	48.0	45.0	60.1	62.2
Location of physician's office[2]						
Within MSA	15.5	18.6	44.9	39.8	60.0	60.5
Outside MSA	14.6	14.3	55.1	53.8	51.6	52.1

[1] Time spent in face-to-face contact between physician and patient.
[2] Age adjusted.

NOTE: Rates are based on the civilian noninstitutionalized population, excluding Alaska and Hawaii.

SOURCE: Division of Health Care Statistics, National Center for Health Statistics: Data from the National Ambulatory Medical Care Survey.

Table 65. Dental visits and interval since last visit, according to selected patient characteristics: United States, 1964, 1981, and 1986

[Data are based on household interviews of a sample of the civilian noninstitutionalized population]

Characteristic	Dental visits			Interval since last dental visit[1]: Less than 1 year			Interval since last dental visit[1]: 2 years or more			Never visited dentist		
	1964	1981	1986	1964	1981	1986	1964	1981	1986	1964	1981	1986
	Number per person			Percent of population								
Total[2,3]	1.6	1.7	2.0	42.7	50.4	56.3	28.7	25.1	25.0	15.5	11.0	10.4
Age												
Under 15 years	1.3	1.5	1.7	39.6	48.5	53.8	5.4	6.7	7.2	46.6	34.6	33.1
Under 5 years	0.3	0.5	0.4	11.1	15.0	19.5	0.3	0.6	0.5	87.0	82.2	78.5
5–14 years	1.9	2.0	2.3	55.1	65.2	71.7	8.2	9.8	10.7	24.8	10.9	9.3
15–44 years	1.9	1.8	2.0	51.8	55.6	61.6	26.9	24.9	26.1	4.0	2.1	1.6
45–64 years	1.7	1.8	2.2	39.1	50.1	55.9	46.3	36.6	35.5	1.3	0.6	0.6
65 years and over	0.8	1.5	2.1	21.5	34.9	42.6	69.0	56.6	51.1	1.5	0.5	0.5
65–74 years	0.9	1.6	2.4	24.9	38.9	47.3	65.2	52.1	46.6	1.1	0.3	0.5
75 years and over	0.6	1.3	1.6	14.9	28.1	35.1	76.3	64.0	58.3	2.4	0.6	*0.5
Sex[2]												
Male	1.4	1.5	1.8	40.9	48.4	54.1	29.6	26.5	26.7	16.1	11.4	10.6
Female	1.7	1.8	2.1	44.4	52.4	58.5	28.0	23.8	23.3	15.0	10.8	10.1
Race[2]												
White	1.7	1.8	2.1	45.3	52.6	58.4	27.8	24.0	23.6	13.8	10.4	9.9
Black[4]	0.8	1.1	1.3	22.3	36.3	42.6	37.6	33.9	35.6	28.0	14.4	12.7
Family income[2,5]												
Less than $10,000	0.9	1.1	1.3	26.4	37.3	41.0	35.4	33.7	36.2	27.4	15.3	13.4
$10,000–$14,999	0.9	1.3	1.3	30.0	37.8	42.7	35.2	33.2	34.2	22.0	14.3	13.6
$15,000–$19,999	1.4	1.4	1.6	39.7	42.6	49.3	30.6	30.3	29.9	15.8	13.0	12.0
$20,000–$34,999	1.9	1.7	2.2	50.1	50.5	59.0	25.3	24.8	22.7	10.9	10.6	10.0
$35,000 or more	2.7	2.1	2.7	63.9	63.9	71.8	16.8	16.4	14.0	7.2	7.6	7.1
Geographic region[2]												
Northeast	2.1	2.1	2.2	48.5	55.6	60.9	26.1	22.6	23.0	12.5	9.0	8.9
Midwest	1.6	1.7	2.0	44.6	52.5	60.0	29.3	24.9	23.5	12.9	9.8	8.7
South	1.2	1.5	1.6	35.8	45.2	49.5	30.9	28.5	29.1	20.9	12.9	12.1
West	1.7	1.7	2.2	43.8	50.8	59.1	27.9	22.4	21.5	14.3	11.9	10.7
Location of residence[2]												
Within MSA	1.8	1.8	2.0	44.9	52.4	57.8	27.5	23.3	23.9	14.4	10.7	10.2
Outside MSA	1.2	1.4	1.7	37.8	46.3	51.8	31.8	28.7	28.3	17.9	11.8	11.0

[1]Percent not shown for an interval of 1 year–less than 2 years.
[2]Age adjusted.
[3]Includes all other races not shown separately and unknown family income.
[4]1964 data are for all other races.
[5]Family income categories for 1986. Income categories in 1964 are: less than $2,000; $2,000–$3,999; $4,000–$6,999; $7,000–$9,999; and $10,000 or more; and, in 1981 are: less than $7,000; $7,000–$9,999; $10,000–$14,999; $15,000–$24,999; and $25,000 or more.

*Relative standard error greater than 30 percent.

SOURCE: Division of Health Interview Statistics, National Center for Health Statistics: Data from the National Health Interview Survey.

Table 66. Discharges, days of care, and average length of stay in short-stay hospitals, according to selected characteristics: United States, 1964, 1981, and 1987

[Data are based on household interviews of a sample of the civilian noninstitutionalized population]

Characteristic	Discharges			Days of care			Average length of stay		
	1964	1981	1987	1964	1981	1987	1964	1981	1987
	Number per 1,000 population						Number of days		
Total[1,2]	109.1	121.7	96.5	970.9	952.1	649.7	8.9	7.8	6.7
Age									
Under 15 years	67.6	64.3	48.6	405.7	343.1	263.9	6.0	5.3	5.4
Under 5 years	94.3	109.5	84.0	731.1	651.3	489.2	7.8	5.9	5.8
5–14 years	53.1	42.0	29.7	229.1	191.1	143.8	4.3	4.6	4.8
15–44 years	100.6	97.0	69.2	760.7	626.2	407.0	7.6	6.5	5.9
45–64 years	146.2	175.1	143.3	1,559.3	1,565.5	987.9	10.7	8.9	6.9
65 years and over	190.0	283.6	255.8	2,292.7	2,843.3	2,111.1	12.1	10.0	8.3
65–74 years	181.2	258.8	227.4	2,150.4	2,407.5	1,862.8	11.9	9.3	8.2
75 years and over	206.7	325.4	301.2	2,560.4	3,578.1	2,507.8	12.4	11.0	8.3
Sex[1]									
Male	103.8	119.3	100.1	1,010.2	1,008.4	702.9	9.7	8.5	7.0
Female	113.7	123.8	93.9	933.4	903.1	605.7	8.2	7.3	6.5
Race[1]									
White	112.4	120.0	94.8	961.4	912.5	621.5	8.6	7.6	6.6
Black[3]	84.0	137.7	117.4	1,062.9	1,302.4	942.8	12.7	9.5	8.0
Family income[1,4]									
Less than $10,000	102.4	165.1	143.7	1,051.2	1,318.5	1,086.0	10.3	8.0	7.6
$10,000–$14,999	116.4	137.5	132.6	1,213.9	1,156.0	956.9	10.4	8.4	7.2
$15,000–$19,999	110.7	124.5	102.4	939.8	1,056.0	701.1	8.5	8.5	6.8
$20,000–$34,999	109.2	119.8	87.9	882.6	841.7	573.1	8.1	7.0	6.5
$35,000 or more	110.7	104.6	77.1	918.9	773.8	475.5	8.3	7.4	6.2
Geographic region[1]									
Northeast	98.5	106.0	84.5	993.8	944.9	620.5	10.1	8.9	7.3
Midwest	109.2	129.1	105.8	944.9	1,006.0	657.5	8.7	7.8	6.2
South	117.8	140.1	108.6	968.0	1,076.2	768.9	8.2	7.7	7.1
West	110.5	95.8	78.3	985.9	649.1	471.5	8.9	6.8	6.0
Location of residence[1]									
Within MSA	107.5	110.3	92.9	1,015.4	926.9	656.3	9.4	8.4	7.1
Outside MSA	113.3	144.0	109.2	871.9	997.3	634.0	7.7	6.9	5.8

[1]Age adjusted.
[2]Includes all other races not shown separately and unknown family income.
[3]1964 data include all other races.
[4]Family income categories for 1987. Income categories in 1964 are: less than $2,000; $2,000–$3,999; $4,000–$6,999; $7,000–$9,999; and $10,000 or more; and, in 1981 are: less than $7,000; $7,000–$9,999; $10,000–$14,999; $15,000–$24,999; and $25,000 or more.

NOTE: Excludes deliveries.

SOURCE: Division of Health Interview Statistics, National Center for Health Statistics: Data from the National Health Interview Survey.

Table 67. Discharges, days of care, and average length of stay in non-Federal short-stay hospitals, according to selected characteristics: United States, 1980–87

[Data are based on a sample of hospital records]

Characteristic	1980[1]	1981	1982	1983	1984	1985	1986	1987
				Discharges per 1,000 population				
Total[2]	159.1	160.2	158.5	157.1	148.2	138.0	132.8	127.9
Sex[2]								
Male	140.1	141.0	140.5	139.9	131.8	123.5	119.8	115.0
Female	178.1	179.5	176.5	174.4	164.7	152.7	146.2	141.2
Age								
Under 15 years	71.6	72.9	71.2	70.8	62.0	57.2	53.5	51.3
15–44 years	150.2	148.7	145.0	140.3	132.2	125.1	118.9	115.1
45–64 years	194.8	195.3	195.5	192.2	183.3	169.5	162.2	156.9
65 years and over	383.7	396.5	398.8	412.7	400.4	368.3	367.3	350.5
65–74 years	315.9	330.0	324.2	334.2	319.6	294.9	296.8	280.9
75 years and over	489.1	498.4	511.4	529.3	520.1	476.5	470.5	451.6
Geographic region[2]								
Northeast	148.4	146.5	145.9	144.2	135.1	129.7	124.1	118.9
Midwest	176.4	179.9	176.0	167.9	156.7	143.5	139.8	135.3
South	166.2	165.2	165.2	167.7	159.5	143.4	136.3	127.9
West	138.0	141.1	138.2	139.6	132.3	131.0	127.8	128.6
				Days of care per 1,000 population				
Total[2]	1,136.5	1,134.0	1,101.7	1,068.8	960.1	877.1	833.1	808.7
Sex[2]								
Male	1,072.6	1,075.4	1,047.6	1,025.7	917.6	841.2	803.4	789.2
Female	1,201.7	1,196.1	1,157.7	1,115.7	1,005.8	914.7	865.0	831.1
Age								
Under 15 years	315.8	337.1	326.4	323.4	277.7	260.8	244.7	240.6
15–44 years	787.0	769.6	742.0	707.5	647.3	603.6	575.7	556.9
45–64 years	1,597.6	1,564.0	1,536.7	1,460.6	1,316.8	1,192.8	1,101.4	1,068.6
65 years and over	4,098.3	4,155.3	4,026.2	4,004.3	3,574.8	3,215.1	3,120.7	3,029.9
65–74 years	3,147.6	3,259.2	3,101.1	3,069.5	2,711.0	2,417.8	2,363.8	2,294.4
75 years and over	5,576.5	5,529.3	5,423.5	5,392.7	4,855.5	4,389.4	4,227.9	4,097.8
Geographic region[2]								
Northeast	1,217.3	1,190.2	1,149.8	1,115.6	1,012.3	963.1	877.6	847.1
Midwest	1,309.4	1,306.7	1,283.0	1,184.4	1,059.9	955.7	914.2	885.3
South	1,114.5	1,112.9	1,083.3	1,087.1	962.9	851.4	817.6	781.5
West	844.6	859.3	825.7	821.9	756.5	717.9	703.0	712.5
				Average length of stay in days				
Total[2]	7.1	7.1	7.0	6.8	6.5	6.4	6.3	6.3
Sex[2]								
Male	7.7	7.6	7.5	7.3	7.0	6.8	6.7	6.9
Female	6.7	6.7	6.6	6.4	6.1	6.0	5.9	5.9
Age								
Under 15 years	4.4	4.6	4.6	4.6	4.5	4.6	4.6	4.7
15–44 years	5.2	5.2	5.1	5.0	4.9	4.8	4.8	4.8
45–64 years	8.2	8.0	7.9	7.6	7.2	7.0	6.8	6.8
65 years and over	10.7	10.5	10.1	9.7	8.9	8.7	8.5	8.6
65–74 years	10.0	9.9	9.6	9.2	8.5	8.2	8.0	8.2
75 years and over	11.4	11.1	10.6	10.2	9.3	9.2	9.0	9.1
Geographic region[2]								
Northeast	8.2	8.1	7.9	7.7	7.5	7.4	7.1	7.1
Midwest	7.4	7.3	7.3	7.1	6.8	6.7	6.5	6.5
South	6.7	6.7	6.6	6.5	6.0	5.9	6.0	6.1
West	6.1	6.1	6.0	5.9	5.7	5.5	5.5	5.5

[1]Geographic data for 1980 are based on the civilian population as of April 1, 1980.
[2]Age adjusted.

NOTES: Excludes newborn infants. Rates are based on the civilian population as of July 1.

SOURCE: Division of Health Care Statistics, National Center for Health Statistics: Data from the National Hospital Discharge Survey.

Table 68. Discharges, days of care, and average length of stay in non-Federal short-stay hospitals for patients discharged with the diagnosis of acquired immunodeficiency syndrome (AIDS) and for all patients: United States, 1984–87

[Data are based on a sample of hospital records]

Type of discharge, sex, age, and year	Discharges		Days of care		Average length of stay in days
	Number in thousands	Number per 1,000 population	Number in thousands	Number per 1,000 population	
Diagnosis of AIDS					
Total:					
1984	10	0.04	123	0.52	12.1
1985	23	0.10	387	1.63	17.1
1986	37	0.16	606	2.53	16.2
1987	50	0.21	782	3.24	15.7
Male, 20–49 years:					
1984	*9	*0.17	*114	*2.26	*13.2
1985	21	0.41	355	6.90	16.8
1986	30	0.58	482	9.21	16.0
1987	40	0.75	621	11.70	15.6
All patients					
Total:					
1984	37,162	158.5	244,652	1,043.6	6.6
1985	35,056	147.9	226,217	954.4	6.5
1986	34,256	143.1	218,496	912.8	6.4
1987	33,387	138.2	214,942	889.4	6.4
Male, 20–49 years:					
1984	4,497	89.5	27,725	551.5	6.2
1985	4,393	85.4	27,117	527.4	6.2
1986	4,300	82.2	26,488	506.3	6.2
1987	4,075	76.8	26,295	495.2	6.5

*Based on a sample size of 30–59 discharges and should be used with caution.

NOTES: Excludes newborn infants. Rates are based on the civilian population as of July 1. AIDS diagnostic category based on the *International Classification of Diseases, 9th Revision, Clinical Modification* and *International Classification of Diseases, 9th Revision Update*. For a listing of the code numbers, see Appendix II, table VI.

SOURCES: Division of Health Care Statistics, National Center for Health Statistics: Data from the National Hospital Discharge Survey; Utilization of short-stay hospitals by patients with AIDS: United States, 1984–1986, by E. J. Graves. *Advance Data From Vital and Health Statistics*. No. 156. DHHS Pub. No. (PHS) 88-1250. Public Health Service. Hyattsville, Md., 1988; Unpublished data.

Table 69 (page 1 of 2). Rates of discharges and days of care in non-Federal short-stay hospitals, according to sex, age, and selected first-listed diagnosis: United States, 1980, 1985, and 1987

[Data are based on a sample of hospital records]

Sex, age, and first-listed diagnosis	Discharges			Days of care		
	1980	1985	1987	1980	1985	1987
	Number per 1,000 population					
Both sexes						
Total[1,2]	159.1	138.0	127.9	1,136.5	877.1	808.7
Females with delivery	14.7	14.1	14.0	55.5	46.1	42.8
Diseases of heart	13.1	13.7	13.8	123.5	98.4	94.5
Malignant neoplasms	7.6	7.4	7.1	90.5	65.2	60.8
Fracture, all sites	4.9	4.4	4.0	51.2	37.1	34.3
Pneumonia, all forms	3.5	3.6	3.7	27.7	26.5	27.7
Male						
All ages[1,2]	140.1	123.5	115.0	1,072.6	841.2	789.2
Diseases of heart	15.9	16.8	17.2	145.0	116.9	114.0
Malignant neoplasms	8.2	7.8	7.3	98.7	71.1	65.9
Fracture, all sites	5.2	4.7	4.3	46.9	35.3	34.7
Pneumonia, all forms	4.1	3.9	4.1	32.5	29.8	31.4
Cerebrovascular diseases	3.5	3.6	3.3	41.9	36.0	31.5
Inguinal hernia	4.3	3.0	2.3	20.0	9.3	5.8
Under 15 years[2]	78.7	63.8	57.3	341.5	287.5	269.9
Acute respiratory infection	5.9	5.2	4.2	22.0	17.2	13.6
Pneumonia, all forms	5.2	4.3	4.2	25.2	18.1	18.6
Bronchitis, emphysema, and asthma	4.0	4.1	3.9	16.3	13.7	12.7
Congenital anomalies	4.0	3.8	2.9	22.2	20.5	15.9
Chronic disease of tonsils and adenoids	5.4	3.5	2.9	9.2	5.1	3.5
Noninfectious enteritis and colitis	4.0	2.8	2.2	16.1	8.3	6.2
Otitis media and eustachian tube disorders	4.5	2.2	1.8	11.3	4.7	4.1
15–44 years[2]	91.5	75.4	68.7	581.0	458.9	441.1
Fracture, all sites	6.3	5.3	4.9	50.1	34.7	36.8
Psychoses	3.0	3.7	4.1	39.2	47.4	51.4
Alcohol dependence syndrome	3.5	3.5	2.8	33.4	38.8	30.9
Diseases of heart	2.9	3.0	2.8	21.7	16.6	15.8
Intervertebral disc disorders	2.3	2.9	2.8	20.7	18.7	14.8
Lacerations and open wounds	3.4	2.6	2.5	17.9	11.0	9.4
45–64 years[2]	195.4	176.2	163.1	1,590.3	1,219.9	1,099.1
Diseases of heart	33.7	36.6	36.7	288.1	237.4	218.8
Malignant neoplasms	14.4	13.1	12.7	167.2	119.8	114.2
Inguinal hernia	6.9	5.1	4.0	36.5	15.3	8.8
Cerebrovascular diseases	4.7	5.0	4.7	49.6	50.7	47.3
Intervertebral disc disorders	3.7	4.6	4.8	34.5	32.8	29.5
Alcohol dependence syndrome	6.4	4.5	3.2	67.8	43.4	31.8
65 years and over[2]	411.8	393.2	381.9	4,244.0	3,315.0	3,163.3
Diseases of heart	78.5	82.6	87.0	786.3	626.9	639.0
Malignant neoplasms	46.2	44.4	40.0	567.9	418.4	374.0
Cerebrovascular diseases	24.4	25.1	22.5	301.2	249.7	206.3
Pneumonia, all forms	15.0	17.3	18.4	166.1	172.6	180.9
Hyperplasia of prostate	18.1	15.5	17.0	176.7	103.5	96.4
Female						
All ages[1,2]	178.1	152.7	141.2	1,201.7	914.7	831.1
Delivery	29.0	27.7	27.6	109.4	91.0	84.5
Diseases of heart	10.7	11.0	11.0	105.1	82.5	78.3
Malignant neoplasms	7.3	7.3	7.1	85.8	61.7	57.9
Fracture, all sites	4.4	4.0	3.7	52.1	36.6	32.1
Pneumonia, all forms	3.0	3.2	3.4	24.0	24.3	25.1
Pregnancy with abortive outcome	4.1	2.8	2.1	8.7	5.9	4.7
Under 15 years[2]	64.2	50.2	45.0	288.9	232.9	209.9
Chronic disease of tonsils and adenoids	6.4	3.7	2.7	11.2	6.0	3.1
Acute respiratory infection	4.6	3.6	3.0	16.0	11.3	8.9
Pneumonia, all forms	3.6	3.6	3.5	17.7	16.4	15.5
Bronchitis, emphysema, and asthma	2.5	2.6	2.6	9.6	9.0	9.3
Noninfectious enteritis and colitis	3.7	2.3	1.9	16.8	6.8	5.0
Otitis media and eustachian tube disorders	3.2	1.7	1.4	7.1	3.9	3.6

See footnotes at end of table.

Table 69 (page 2 of 2). Rates of discharges and days of care in non-Federal short-stay hospitals, according to sex, age, and selected first-listed diagnosis: United States, 1980, 1985, and 1987

[Data are based on a sample of hospital records]

Sex, age, and first-listed diagnosis	Discharges			Days of care		
	1980	1985	1987	1980	1985	1987
Female—Con.	Number per 1,000 population					
15–44 years[2]	208.9	173.4	160.3	986.4	744.3	669.7
Delivery	70.7	67.8	67.4	264.5	222.4	206.6
Pregnancy with abortive outcome	9.9	6.7	5.1	21.2	14.4	11.3
Inflammatory disease of female pelvic organs	5.1	3.7	3.2	25.7	17.7	13.9
Benign neoplasms	4.8	3.4	3.1	25.7	17.2	14.1
Psychoses	2.4	3.4	3.7	36.7	52.3	52.0
Disorders of menstruation	6.6	2.6	2.0	21.6	9.7	7.0
45–64 years[2]	194.3	163.4	151.2	1,604.1	1,168.1	1,040.5
Diseases of heart	17.8	17.9	18.7	152.9	120.5	121.8
Malignant neoplasms	16.6	15.6	16.2	190.8	129.6	125.0
Benign neoplasms	6.7	5.1	4.8	44.8	32.0	25.3
Cholelithiasis	4.7	4.4	4.6	42.9	30.9	28.2
Fracture, all sites	4.6	4.1	3.7	51.8	29.8	26.9
Diabetes	6.3	3.8	3.8	63.5	31.4	30.0
65 years and over[2]	364.7	351.4	329.1	3,999.8	3,147.1	2,938.6
Diseases of heart	64.8	68.1	66.9	701.1	551.3	511.0
Malignant neoplasms	28.5	28.1	26.4	383.8	280.6	250.6
Cerebrovascular diseases	21.6	23.3	22.1	287.9	249.3	236.8
Fracture, all sites	19.2	19.3	17.3	309.5	232.5	203.0
Pneumonia, all forms	9.7	11.8	12.6	109.2	116.9	126.9
Eye diseases and conditions	16.4	8.2	4.7	67.3	21.0	13.1

[1] Age adjusted.
[2] Includes discharges with first-listed diagnoses not shown in table.

NOTES: Excludes newborn infants. Rates are based on the civilian population. In each sex and age group, data are shown for diagnoses with the five highest discharge rates in 1980 and 1985. Diagnostic categories are based on the *International Classification of Diseases, 9th Revision, Clinical Modification*. For a listing of the code numbers, see Appendix II, table VI.

SOURCE: Division of Health Care Statistics, National Center for Health Statistics: Data from the National Hospital Discharge Survey.

Table 79 (page 1 of 2). Discharges and average length of stay in non-Federal short-stay hospitals, according to sex, age, and selected first-listed diagnosis: United States, 1980, 1985, and 1987

[Data are based on a sample of hospital records]

Sex, age, and first-listed diagnosis	Discharges			Average length of stay		
	1980	1985	1987	1980	1985	1987
Both sexes	Number in thousands			Number of days		
Total [1]	37,632	35,056	33,387	7.3	6.5	6.4
Females with delivery	3,762	3,854	3,911	3.8	3.3	3.1
Diseases of heart	3,201	3,584	3,736	9.5	7.3	6.9
Malignant neoplasms	1,829	1,911	1,879	12.0	8.9	8.7
Fracture, all sites	1,163	1,129	1,062	10.8	8.7	8.9
Pneumonia, all forms	782	854	924	7.9	7.4	8.0
Male						
All ages [1]	15,145	14,160	13,568	7.7	6.9	6.9
Diseases of heart	1,688	1,910	2,016	9.1	7.0	6.7
Malignant neoplasms	875	892	868	12.0	9.1	9.0
Fracture, all sites	582	550	519	9.0	7.7	8.3
Pneumonia, all forms	414	433	488	8.2	7.8	7.9
Cerebrovascular diseases	371	416	392	12.1	10.0	9.6
Inguinal hernia	458	343	266	4.7	3.1	2.5
Under 15 years [1]	2,063	1,698	1,537	4.3	4.5	4.7
Acute respiratory infection	154	138	114	3.8	3.3	3.2
Pneumonia, all forms	136	115	113	4.9	4.2	4.4
Bronchitis, emphysema, and asthma	105	110	105	4.0	3.3	3.3
Congenital anomalies	106	101	79	5.5	5.4	5.4
Chronic disease of tonsils and adenoids	141	92	77	1.7	1.5	1.2
Noninfectious enteritis and colitis	106	74	59	4.0	3.0	2.8
Otitis media and eustachian tube disorders	118	59	47	2.5	2.1	2.3
15–44 years [1]	4,687	4,153	3,874	6.3	6.1	6.4
Fracture, all sites	320	290	274	8.0	6.6	7.6
Psychoses	155	204	231	12.9	12.8	12.5
Alcohol dependence syndrome	180	195	160	9.5	11.0	10.9
Diseases of heart	149	165	157	7.5	5.5	5.7
Intervertebral disc disorders	120	161	157	6.8	6.4	5.3
Lacerations and open wounds	176	143	140	5.2	4.2	3.8
45–64 years [1]	4,127	3,776	3,528	8.1	6.9	6.7
Diseases of heart	712	784	795	8.5	6.5	6.0
Malignant neoplasms	304	281	275	11.6	9.1	9.0
Inguinal hernia	146	110	88	5.3	3.0	2.2
Cerebrovascular diseases	99	107	102	10.6	10.2	10.0
Intervertebral disc disorders	76	98	103	9.4	7.2	6.2
Alcohol dependence syndrome	134	97	70	10.7	9.6	9.9
65 years and over [1]	4,268	4,533	4,629	10.3	8.4	8.3
Diseases of heart	814	953	1,054	10.0	7.6	7.3
Malignant neoplasms	479	512	485	12.7	9.4	9.3
Cerebrovascular diseases	253	289	273	12.3	9.9	9.2
Pneumonia, all forms	156	199	222	11.1	10.0	9.9
Hyperplasia of prostate	188	179	206	9.8	6.7	5.7
Female						
All ages [1]	22,686	20,896	19,818	7.0	6.2	6.1
Delivery	3,762	3,854	3,911	3.8	3.3	3.1
Diseases of heart	1,513	1,674	1,720	10.0	7.6	7.2
Malignant neoplasms	954	1,019	1,011	12.0	8.7	8.3
Fracture, all sites	580	579	543	12.6	9.8	9.4
Pneumonia, all forms	368	421	456	8.4	8.1	8.1
Pregnancy with abortive outcome	531	382	301	2.1	2.1	2.2
Under 15 years [1]	1,609	1,274	1,150	4.5	4.6	4.7
Chronic disease of tonsils and adenoids	160	94	69	1.8	1.6	1.2
Acute respiratory infection	115	91	76	3.5	3.2	3.0
Pneumonia, all forms	91	91	90	4.9	4.6	4.4
Bronchitis, emphysema, and asthma	63	65	67	3.8	3.5	3.6
Noninfectious enteritis and colitis	92	59	48	4.6	2.9	2.7
Otitis media and eustachian tube disorders	81	42	37	2.2	2.3	2.5

See footnotes at end of table.

Table 70 (page 2 of 2). Discharges and average length of stay in non-Federal short-stay hospitals, according to sex, age, and selected first-listed diagnosis: United States, 1980, 1985, and 1987

[Data are based on a sample of hospital records]

Sex, age, and first-listed diagnosis	Discharges			Average length of stay		
	1980	1985	1987	1980	1985	1987
Female—Con.	Number in thousands			Number of days		
15–44 years [1]	10,949	9,813	9,268	4.8	4.3	4.2
Delivery	3,741	3,838	3,897	3.7	3.3	3.1
Pregnancy with abortive outcome	525	378	297	2.1	2.2	2.2
Inflammatory disease of female pelvic organs	268	210	184	5.1	4.8	4.4
Benign neoplasms	253	194	180	5.4	5.0	4.5
Psychoses	129	192	216	15.1	15.4	13.9
Disorders of menstruation	347	148	114	3.3	3.7	3.6
45–64 years [1]	4,533	3,834	3,571	8.3	7.1	6.9
Diseases of heart	415	420	441	8.6	6.7	6.5
Malignant neoplasms	367	367	383	11.5	8.3	7.7
Benign neoplasms	156	120	113	6.7	6.3	5.3
Cholelithiasis	109	103	109	9.2	7.1	6.1
Fracture, all sites	107	96	87	11.3	7.3	7.3
Diabetes	148	88	89	10.0	8.3	7.9
65 years and over [1]	5,596	5,975	5,830	11.0	9.0	8.9
Diseases of heart	995	1,158	119	10.8	8.1	7.6
Malignant neoplasms	437	478	468	13.5	10.0	9.5
Cerebrovascular diseases	331	396	392	13.3	10.7	10.7
Fracture, all sites	295	328	307	16.1	12.1	11.7
Pneumonia, all forms	150	201	223	11.2	9.9	10.1
Eye diseases and conditions	251	140	83	4.1	2.5	2.8

[1] Includes discharges with first-listed diagnoses not shown in table.

NOTES: Excludes newborn infants. In each sex and age group data are shown for diagnoses with the five highest discharge rates in 1980 and 1985. Diagnostic categories are based on the *International Classification of Diseases, 9th Revision, Clinical Modification*. For a listing of the code numbers, see Appendix II, table VI.

SOURCE: Division of Health Care Statistics, National Center for Health Statistics: Data from the National Hospital Discharge Survey.

Table 71 (page 1 of 2). Operations for inpatients discharged from non-Federal short-stay hospitals, according to sex, age, and surgical category: United States, 1980, 1985, and 1987

[Data are based on a sample of hospital records]

Sex, age, and surgical category	Operations in thousands			Operations per 1,000 population		
	1980	1985	1987	1980	1985	1987
Male						
All ages [1,2]	8,505	8,805	9,073	78.1	76.3	76.4
Cardiac catheterization	228	439	533	2.2	3.9	4.7
Repair of inguinal hernia	483	370	290	4.6	3.3	2.5
Prostatectomy	335	367	410	3.1	3.2	3.4
Reduction of fracture (excluding skull, nose, and jaw)	325	339	367	2.9	2.8	3.0
Biopsies on the digestive system	161	220	230	1.5	1.9	1.9
Tonsillectomy, with or without adenoidectomy	195	135	115	2.0	1.3	1.2
Under 15 years [2]	1,068	831	725	40.7	31.3	27.0
Tonsillectomy, with or without adenoidectomy	138	97	85	5.3	3.6	3.2
Reduction of fracture (excluding skull, nose, and jaw)	55	57	55	2.1	2.1	2.1
Myringotomy	115	53	41	4.4	2.0	1.5
Repair of inguinal hernia	86	46	34	3.3	1.7	1.3
Appendectomy, excluding incidental [3]	43	41	38	1.6	1.5	1.4
Circumcision	43	31	26	1.6	1.2	1.0
15–44 years [2]	2,900	2,717	2,640	56.6	49.4	46 8
Reduction of fracture (excluding skull, nose, and jaw)	188	187	206	3.7	3.4	3.7
Excision or destruction of intervertebral disc and spinal fusion	67	119	110	1.3	2.2	1.9
Operations on muscles, tendons, fascia, and bursa	110	100	95	2.2	1.8	1.7
Repair of inguinal hernia	127	91	69	2.5	1.7	1.2
Appendectomy, excluding incidental [3]	85	88	101	1.7	1.6	1.8
Excision of semilunar cartilage of knee	94	48	28	1.8	0.9	0.5
45–64 years [2]	2,313	2,494	2,612	109.5	116.4	120.7
Cardiac catheterization	129	241	289	6.1	11.3	13.4
Repair of inguinal hernia	152	116	91	7.2	5.4	4.2
Direct heart revascularization (coronary bypass)	72	102	131	3.4	4.8	6.1
Prostatectomy	83	81	90	3.9	3.8	4.2
Biopsies on the digestive system	56	67	69	2.6	3.1	3.2
Operations on muscles, tendons, fascia, and bursa	58	50	51	2.8	2.3	2.4
65 years and over [2]	2,224	2,762	3,097	214.6	239.5	255.5
Prostatectomy	251	284	318	24.2	24.7	26.3
Cardiac catheterization	52	126	182	5.0	10.9	15.0
Repair of inguinal hernia	119	116	96	11.4	10.1	7.9
Biopsies on the digestive system	61	107	113	5.9	9.3	9.3
Pacemaker insertion, replacement, removal, and repair	75	82	95	7.3	7.1	7.9
Extraction of lens	124	53	18	12.0	4.6	1.5
Female						
All ages [1,2]	15,989	15,994	16,583	126.1	117.2	118.3
Procedures to assist delivery	2,391	2,494	2,938	18.4	13.0	20.7
Cesarean section [4]	619	877	953	4.8	6.3	6.7
Hysterectomy	649	670	655	5.2	5.0	4.8
Oophorectomy and salpingo–oophorectomy	483	525	490	3.9	4.0	3.7
Repair of current obstetrical laceration	355	548	660	2.8	3.9	4.7
Bilateral destruction or occlusion of fallopian tubes	641	466	415	4.9	3.3	2.9
Diagnostic dilation and curettage of uterus	923	349	206	7.3	2.6	1.5
Under 15 years [2]	771	553	471	30.8	21.8	18.4
Tonsillectomy, with or without adenoidectomy	156	100	74	6.2	3.9	2.9
Myringotomy	87	36	20	3.5	1.4	0.8
Reduction of fracture (excluding skull, nose, and jaw)	32	33	28	1.3	1.3	1.1
Appendectomy, excluding incidental [3]	34	28	28	1.4	1.1	1.1
Operations on muscles, tendons, fascia, and bursa	23	11	11	0.9	0.5	0.4
Adenoidectomy without tonsillectomy	31	*7	*	1.2	*0.3	*
15–44 years [2]	9,625	9,340	9,937	181.9	165.0	171.9
Procedures to assist delivery	2,381	2,483	2,927	45.0	43.9	50.6
Cesarean section	614	875	951	11.8	15.5	16.4
Repair of current obstetrical laceration	352	546	656	6.7	9.6	11.3
Bilateral destruction or occlusion of fallopian tubes	632	461	413	11.9	8.1	7.1
Hysterectomy	402	421	406	7.6	7.4	7.0
Diagnostic dilation and curettage of uterus	625	232	141	11.8	4.1	2.4

See footnotes at end of table.

Table 71 (page 2 of 2). Operations for inpatients discharged from non-Federal short-stay hospitals, according to sex, age, and surgical category: United States, 1980, 1985, and 1987

[Data are based on a sample of hospital records]

Sex, age, and surgical category	Operations in thousands			Operations per 1,000 population		
	1980	1985	1987	1980	1985	1987
Female—Con.						
45–64 years [2]	3,113	2,893	2,847	133.4	123.3	120.5
Hysterectomy	203	190	188	8.7	8.1	8.0
Oophorectomy and salpingo-oophorectomy	162	165	163	7.0	7.0	6.9
Cardiac catheterization	58	108	151	2.5	4.6	6.4
Cholecystectomy	107	104	114	4.6	4.4	4.8
Diagnostic dilation and curettage of uterus	241	83	48	10.3	3.5	2.0
Biopsies on the integumentary system (breast, skin, and subcutaneous tissue)	69	48	39	2.9	2.1	1.7
65 years and over [2]	2,480	3,208	3,328	161.6	188.7	187.9
Reduction of fracture (excluding skull, nose, and jaw)	127	163	169	8.3	9.6	9.5
Biopsies on the digestive system	72	140	152	4.7	8.2	8.6
Arthroplasty and replacement of hip	72	108	115	4.7	6.4	6.5
Extraction of lens	211	104	38	13.8	6.1	2.2
Cardiac catheterization	32	101	146	2.1	6.0	8.2
Insertion of prosthetic lens (pseudophakos)	93	92	35	6.1	5.4	2.0
Cholecystectomy	83	89	106	5.4	5.2	6.0

[1] Rates are age adjusted.
[2] Includes operations not listed in table.
[3] Limited to estimated number of appendectomies, excluding those performed incidental to other abdominal surgery.
[4] Cesarean sections accounted for 16.5 percent of all deliveries in 1980, 22.7 percent in 1985, and 24.4 percent in 1987.

* Estimates based on fewer than 30 discharges are not shown; estimates based on 30–59 discharges should be used with caution.

NOTES: Excludes newborn infants. Rates are based on the civilian population. In each sex and age group, data are shown for operations with the five highest rates in 1980 and 1985. Surgical categories are based on the *International Classification of Diseases, 9th Revision, Clinical Modification*. For a listing of the code numbers, see Appendix II, table VII.

SOURCE: Division of Health Care Statistics, National Center for Health Statistics: Data from the National Hospital Discharge Survey.

Table 72 (page 1 of 2). Diagnostic and other nonsurgical procedures for inpatients discharged from non-Federal short-stay hospitals, according to sex, age, and procedure category: United States, 1980, 1985, and 1987

[Data are based on a sample of hospital records]

Sex, age, and procedure category	Procedures in thousands			Procedures per 1,000 population		
	1980	1985	1987	1980	1985	1987
Male						
All ages [1,2]	3,386	5,889	6,643	31.3	51.1	56.2
Computerized axial tomography (CAT scan)	152	671	814	1.4	5.8	6.8
Diagnostic ultrasound	114	478	616	1.0	4.1	5.2
Cystoscopy	543	461	444	5.1	4.0	3.7
Angiocardiography using contrast material	174	431	617	1.6	3.9	5.4
Radioisotope scan	236	375	350	2.1	3.3	2.9
Arteriography using contrast material	180	262	251	1.7	2.3	2.1
Endoscopy of large intestine	228	259	245	2.1	2.2	2.0
Under 15 years [2]	217	297	377	8.3	11.1	14.1
Spinal tap	39	62	76	1.5	2.3	2.8
Computerized axial tomography (CAT scan)	17	35	54	0.7	1.3	2.0
Diagnostic ultrasound	*6	23	34	*0.2	0.9	1.3
Electroencephalogram	*5	19	20	*0.2	0.7	0.8
Application of cast or splint	21	16	13	0.8	0.6	0.5
Cystoscopy	23	11	*8	0.9	0.4	*0.3
Radioisotope scan	*8	*9	11	*0.3	*0.4	0.4
15–44 years [2]	884	1,294	1,368	17.3	23.5	24.3
Computerized axial tomography (CAT scan)	37	174	217	0.7	3.2	3.8
Contrast myelogram	88	130	111	1.7	2.4	2.0
Diagnostic ultrasound	25	96	113	0.5	1.7	2.0
Arthroscopy of knee	94	75	59	1.8	1.4	1.0
Radioisotope scan	48	67	65	0.9	1.2	1.2
Endoscopy of large intestine	52	54	36	1.0	1.0	0.6
Cystoscopy	80	47	39	1.6	0.9	0.7
Application of cast or splint	54	30	27	1.1	0.6	0.5
45–64 years [2]	1,128	1,866	2,060	53.4	87.1	95.2
Angiocardiography using contrast material	106	251	350	5.0	11.7	16.2
Computerized axial tomography (CAT scan)	43	182	205	2.0	8.5	9.5
Diagnostic ultrasound	41	146	178	1.9	6.8	8.2
Radioisotope scan	75	121	106	3.5	5.7	4.9
Cystoscopy	153	114	108	7.3	5.3	5.0
Arteriography using contrast material	76	94	92	3.6	4.4	4.2
Endoscopy of large intestine	86	76	70	4.0	3.5	3.2
65 years and over [2]	1,158	2,432	2,838	111.8	211.0	234.2
Cystoscopy	287	288	290	27.7	25.0	23.9
Computerized axial tomography (CAT scan)	54	280	337	5.2	24.3	27.8
Diagnostic ultrasound	42	213	290	4.0	18.4	24.0
Radioisotope scan	105	177	167	10.1	15.4	13.8
Arteriography using contrast material	72	135	121	7.0	11.7	10.0
Endoscopy of large intestine	86	126	138	8.3	10.9	11.3
Female						
All ages [1,2]	3,532	6,072	6,820	27.5	43.3	47.3
Diagnostic ultrasound	204	756	981	1.6	5.4	6.7
Computerized axial tomography (CAT scan)	154	707	833	1.2	4.9	5.6
Radioisotope scan	269	463	409	2.1	3.2	2.8
Endoscopy of large intestine	307	331	304	2.3	2.3	2.0
Endoscopy of small intestine	164	281	341	1.3	2.0	2.3
Laparoscopy (excluding that for ligation and division of fallopian tubes)	235	209	176	1.8	1.5	1.2
Cystoscopy	324	184	149	2.6	1.3	1.0
Under 15 years [2]	191	256	293	7.6	10.1	11.5
Spinal tap	26	50	66	1.0	2.0	2.6
Computerized axial tomography (CAT scan)	*10	33	32	*0.4	1.3	1.3
Diagnostic ultrasound	*5	25	35	*0.2	1.0	1.4
Electroencephalogram	*	15	15	*	0.6	0.6
Cystoscopy	38	*8	*5	1.5	*0.3	*0.2
Radioisotope scan	*6	*8	*7	*0.2	*0.3	*0.3
Application of cast or splint	13	*6	*8	0.5	*0.2	*0.3

See footnotes at end of table.

Table 72 (page 2 of 2). Diagnostic and other nonsurgical procedures for inpatients discharged from non-Federal short-stay hospitals, according to sex, age, and procedure category: United States, 1980, 1985, and 1987

[Data are based on a sample of hospital records]

Sex, age, and procedure category	Procedures in thousands			Procedures per 1,000 population		
	1980	1985	1987	1980	1985	1987
Female—Con.						
15–44 years [2]	1,203	1,606	1,687	22.7	28.4	29.2
Diagnostic ultrasound	94	283	376	1.8	5.0	6.5
Laparoscopy (excluding that for ligation and division of fallopian tubes)	214	197	182	4.1	3.5	2.8
Computerized axial tomography (CAT scan)	36	137	149	0.7	2.4	2.6
Contrast myelogram	66	96	80	1.2	1.7	1.4
Biliary tract X-ray	60	90	107	1.1	1.6	1.9
Endoscopy of large intestine	77	58	51	1.5	1.0	0.9
Cystoscopy	97	51	37	1.8	0.9	0.6
45–64 years [2]	1,030	1,584	1,734	44.2	67.5	73.4
Computerized axial tomography (CAT scan)	42	167	191	1.8	7.1	8.1
Diagnostic ultrasound	44	154	182	1.9	6.6	7.7
Radioisotope scan	92	128	113	3.9	5.5	4.8
Angiocardiography using contrast material	49	105	173	2.1	4.5	7.3
Endoscopy of large intestine	94	89	64	4.0	3.8	2.7
Endoscopy of small intestine	55	78	93	2.3	3.3	3.9
Cystoscopy	93	48	44	4.0	2.1	1.9
65 years and over [2]	1,107	2,626	3,106	72.1	154.4	175.3
Computerized axial tomography (CAT scan)	66	370	461	4.3	21.8	26.0
Diagnostic ultrasound	62	294	387	4.0	17.3	21.8
Radioisotope scan	143	244	219	9.3	14.4	12.4
Endoscopy of large intestine	131	181	188	8.5	10.7	10.6
Endoscopy of small intestine	55	133	180	3.6	7.8	10.2
Cystoscopy	96	77	62	6.2	4.5	3.5

[1] Rates are age adjusted.
[2] Includes nonsurgical procedures not shown.

* Estimates based on fewer than 30 discharges are not shown; estimates based on 30–59 discharges should be used with caution.

NOTES: Excludes newborn infants. Rates are based on the civilian population. In each sex and age group, data are shown for procedures with the five highest rates in 1980 and 1985. Procedure categories are based on the *International Classification of Diseases, 9th Revision, Clinical Modification*. For a listing of the code numbers, see Appendix II, table VIII.

SOURCE: Division of Health Care Statistics, National Center for Health Statistics: Data from the National Hospital Discharge Survey.

Copyright material has been deleted, not available for Microfiche Edition.

Table 74. Nursing home and personal care home residents 65 years of age and over and rate per 1,000 population, according to sex and race: United States, 1963, 1973–74, 1977, and 1985

[Data are based on a sample of nursing homes]

Age, sex, and race	Residents				Residents per 1,000 population[1]			
	1963	1973–74[2]	1977[3]	1985	1963	1973–74[2]	1977[3]	1985
Age								
All ages	445,600	961,500	1,126,000	1,318,300	25.4	44.7	47.1	46.2
65–74 years	89,600	163,100	211,400	212,100	7.9	12.3	14.4	12.5
75–84 years	207,200	384,900	464,700	509,000	39.6	57.7	64.0	57.7
85 years and over	148,700	413,600	449,900	597,300	148.4	257.3	225.9	220.3
Sex								
Male	141,000	265,700	294,000	334,400	18.1	30.0	30.3	29.0
65–74 years	35,100	65,100	80,200	80,600	6.8	11.3	12.6	10.8
75–84 years	65,200	102,300	122,100	141,300	29.1	39.9	44.9	43.0
85 years and over	40,700	98,300	91,700	112,600	105.6	182.7	146.3	145.7
Female	304,500	695,800	832,000	983,900	31.1	54.9	58.6	57.9
65–74 years	54,500	98,000	131,200	131,500	8.8	13.1	15.8	13.8
75–84 years	142,000	282,600	342,600	367,700	47.5	68.9	75.4	66.4
85 years and over	108,000	315,300	358,200	484,700	175.1	294.9	262.4	250.1
Race[4]								
White	431,700	920,600	1,059,900	1,227,400	26.6	46.9	48.9	47.7
65–74 years	84,400	150,100	187,500	187,800	8.1	12.5	14.2	12.3
75–84 years	202,000	369,700	443,200	473,600	41.7	60.3	67.0	59.1
85 years and over	145,400	400,800	429,100	566,000	157.7	270.8	234.2	228.7
Black	13,800	37,700	60,800	82,000	10.3	22.0	30.7	35.0
65–74 years	5,200	12,200	22,000	22,500	5.9	11.1	17.6	15.4
75–84 years	5,300	13,400	19,700	30,600	13.8	26.7	33.4	45.3
85 years and over	3,300	12,100	19,100	29,000	41.8	105.7	133.6	141.5

[1]Residents per 1,000 population for 1973–74 and 1977 will differ from those presented in the sources because the rates have been recomputed using revised census estimates for these years (see source note).
[2]Excludes residents in personal care or domiciliary care homes.
[3]Includes residents in domiciliary care homes.
[4]For data years 1973–74 and 1977, all Hispanics were included in the white category. For 1963, black includes all other races.

SOURCES: National Center for Health Statistics: Characteristics of residents in institutions for the aged and chronically ill, United States, April–June 1963, by G. S. Wunderlich. *Vital and Health Statistics.* Series 12, No. 2. DHEW Pub. No. (PHS) 1000. Public Health Service. Washington. U.S. Government Printing Office, Sept. 1965; Characteristics, social contacts, and activities of nursing home residents, United States: 1973–74 National Nursing Home Survey, by A. Zappolo. *Vital and Health Statistics.* Series 13, No. 27. DHEW Pub. No. (HRA) 77–1778. Health Resources Administration. Washington. U.S. Government Printing Office, May 1977; Characteristics of nursing home residents, health status, and care received: National Nursing Home Survey, United States, May–December 1977, by E. Hing. *Vital and Health Statistics.* Series 13, No. 51. DHHS Pub. No. (PHS) 81–1712. Public Health Service. Washington. U.S. Government Printing Office, April 1981; The National Nursing Home Survey: 1985 summary for the United States, by E. Hing, E. Sekscenski, and G. Strahan. *Vital and Health Statistics.* Series 13, No. 97. In press; U.S. Bureau of the Census: Preliminary estimates of the population of the United States by age, sex, and race: 1970–1981. *Current Population Reports.* Series P–25, No. 917. Washington. U.S. Government Printing Office, July 1982.

Table 78. Nursing home residents, according to selected functional status and age: United States, 1977 and 1985

[Data are based on a sample of nursing homes]

Functional status	1977					1985				
	All ages	Under 65 years	65–74 years	75–84 years	85 years and over	All ages	Under 65 years	65–74 years	75–84 years	85 years and over
	Number of residents									
All residents	1,303,100	177,100	211,400	464,700	449,900	1,491,400	173,100	212,100	509,000	597,300
	Percent distribution									
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Dressing										
Independent	30.6	44.8	38.8	27.5	24.2	24.6	41.1	29.8	24.1	18.3
Requires assistance[1]	69.4	55.2	61.2	72.5	75.8	75.4	58.9	70.2	75.9	81.7
Using toilet room										
Independent	47.5	61.8	53.1	45.7	41.0	39.1	57.1	43.4	39.7	32.0
Requires assistance	42.5	28.1	37.8	44.7	48.0	48.9	31.5	45.8	47.8	55.9
Does not use	10.1	10.1	9.1	9.6	11.0	12.0	11.4	10.8	12.6	12.1
Mobility										
Walks independently	33.9	53.6	43.2	33.2	22.5	29.3	51.0	39.6	30.4	18.4
Walks with assistance	28.8	15.7	21.4	30.5	35.6	24.8	13.5	20.4	24.7	29.6
Chairfast	32.0	25.5	30.5	31.5	35.9	39.5	29.3	33.7	38.7	45.1
Bedfast	5.3	5.2	5.0	4.9	6.1	6.5	6.2	6.3	6.1	6.9
Continence										
No difficulty controlling bowel or bladder	54.7	68.0	62.4	52.9	47.8	48.1	67.7	57.1	45.0	41.9
Difficulty controlling—										
Bowel	3.7	3.0	3.7	4.0	3.8	1.9	*1.5	*2.0	1.7	2.2
Bladder	9.0	5.8	6.5	9.4	11.1	10.3	6.4	6.8	11.0	12.0
Bowel and bladder	25.9	16.8	20.6	26.9	30.8	31.7	16.8	27.5	33.6	35.8
Ostomy in either bowel or bladder	6.7	6.4	6.8	6.9	6.5	8.1	7.5	6.6	8.7	8.1
Eating										
Independent	67.4	73.8	72.9	66.2	63.5	60.7	68.5	66.6	60.9	56.1
Requires assistance[2]	32.6	26.2	27.1	33.8	36.5	39.3	31.5	33.4	39.1	43.9
Vision										
Not impaired	67.2	81.0	75.4	67.9	57.2	75.9	88.5	83.3	77.8	68.1
Partially impaired	19.0	10.9	13.4	19.6	24.1	14.6	5.9	10.0	14.2	19.1
Severely impaired	6.6	2.2	3.3	6.1	10.4	5.6	*1.9	4.3	4.1	8.4
Completely lost	2.9	2.2	2.6	2.6	3.8	2.5	*2.5	*1.3	2.1	3.2
Unknown	4.3	3.8	5.3	3.9	4.5	1.4	*1.2	*1.0	1.8	1.2
Hearing										
Not impaired	69.5	87.6	81.0	71.6	54.9	78.5	96.1	90.4	82.6	65.7
Partially impaired	21.7	6.6	11.4	21.2	33.1	16.7	*3.1	7.4	14.8	25.5
Severely impaired	4.3	*0.4	1.9	3.0	8.4	3.4	*0.1	*1.1	1.5	6.8
Completely lost	0.7	*1.1	*0.7	*0.6	*0.7	0.6	*0.1	*0.4	*0.6	*0.8
Unknown	3.7	4.4	5.0	3.6	3.0	0.8	*0.5	*0.7	*0.5	1.1

[1]Includes those who do not dress.
[2]Includes those who are tube or intravenously fed.

*Relative standard error greater than 30 percent.

SOURCES: Division of Health Care Statistics, National Center for Health Statistics: Characteristics of nursing home residents, health status, and care received: National Nursing Home Survey, United States, May–December 1977, by E. Hing. *Vital and Health Statistics*. Series 13, No. 51. DHHS Pub. No. (PHS) 81–1712. Public Health Service. Washington. U.S. Government Printing Office, April 1981; The National Nursing Home Survey: 1985 summary for the United States, by E. Hing, E. Sekscenski, and G. Strahan. *Vital and Health Statistics*. Series 13, No. 97. In press.

Table 78. Admissions to mental health organizations and rate per 100,000 civilian population, according to type of service and organization: United States, selected years 1969–86

[Data are based on inventories of mental health organizations]

Service and organization	Admissions in thousands				Rate per 100,000 civilian population			
	1969	1975	1983	1986	1969	1975	1983	1986
Inpatient and residential treatment								
All organizations	1,283	1,558	1,633	1,817	644.2	736.5	701.4	758.7
State and county mental hospitals	487	434	339	330	244.4	205.1	146.0	137.7
Private psychiatric hospitals	92	126	165	235	46.2	59.4	70.9	98.0
Non-Federal general hospital psychiatric services	478	544	786	849	240.1	257.2	336.8	354.8
Veterans Administration psychiatric services[1]	135	181	149	180	67.9	85.5	64.3	75.1
Federally funded community mental health centers	60	236	...	...	30.0	111.7	...	...
Residential treatment centers for emotionally disturbed children	8	12	17	25	3.8	5.7	7.1	10.2
All other[2,3]	23	25	177	198	11.8	11.9	76.3	82.9
Outpatient treatment								
All organizations	1,147	2,291	2,665	2,765	575.9	1,083.2	1,147.5	1,155.0
State and county mental hospitals	164	146	84	62	82.5	69.1	36.3	26.0
Private psychiatric hospitals	26	33	78	123	12.8	15.6	33.4	51.5
Non-Federal general hospital psychiatric services	171	255	469	494	85.7	120.5	202.1	206.3
Veterans Administration psychiatric services[1]	17	94	103	125	8.4	44.4	44.5	52.4
Federally funded community mental health centers	177	785	...	...	88.7	371.2	...	...
Residential treatment centers for emotionally disturbed children	8	20	33	62	4.0	9.4	14.1	25.8
Freestanding psychiatric outpatient clinics[3]	538	871	538	391	270.4	411.8	231.7	163.2
All other[2,3]	46	87	1,360	1,508	23.4	41.2	585.4	629.8
Partial care treatment								
All organizations	55	163	177	189	27.8	77.2	76.3	79.1
State and county mental hospitals	11	14	4	6	5.3	6.7	1.6	2.4
Private psychiatric hospitals	3	3	6	9	1.4	1.5	2.4	3.7
Non-Federal general hospital psychiatric services	18	14	46	39	9.1	6.7	19.8	16.4
Veterans Administration psychiatric services[1]	4	8	10	7	1.8	3.7	4.4	3.1
Federally funded community mental health centers	13	94	...	...	6.5	44.5	...	...
Residential treatment centers for emotionally disturbed children	1	3	3	5	0.3	1.6	1.5	2.3
Freestanding psychiatric outpatient clinics[3,4]	4	22	5	...	2.2	10.4	2.3	...
All other[2,3,5]	2	5	103	123	1.2	2.1	44.3	51.2

[1]Includes Veterans Administration neuropsychiatric hospitals and Veterans Administration general hospitals with separate psychiatric services.
[2]Includes other multiservice mental health organizations with inpatient and residential treatment services that are not elsewhere classified.
[3]Beginning in 1983 a definitional change sharply increased the number of multiservice mental health organizations while decreasing the number of freestanding psychiatric outpatient clinics. See Appendix I.
[4]Beginning in 1986 outpatient psychiatric clinics providing partial care are counted as multiservice mental health organizations in the "all other" category.
[5]Includes freestanding psychiatric partial care organizations.

NOTE: Changes in reporting procedures in 1981 affect the comparability of data with those from previous years.

SOURCES: Survey and Reports Branch, Division of Biometry and Applied Sciences, National Institute of Mental Health: R. W. Manderscheid and S. A. Barrett: *Mental Health, United States, 1987*. DHHS Pub. No. (ADM) 87-1518. U.S. Government Printing Office, 1987; Unpublished data.

Table 77. Inpatient and residential treatment episodes in mental health organizations, rate per 100,000 civilian population, and inpatient days, according to type of organization: United States, selected years 1969–86

[Data are based on inventories of mental health organizations]

Organization	1969	1975	1981[1]	1983	1986
			Episodes in thousands		
All organizations	1,710	1,817	1,720	1,861	2,052
State and county mental hospitals	787	599	499	459	442
Private psychiatric hospitals	103	137	177	181	258
Non-Federal general hospital psychiatric services	535	566	677	820	883
Veterans Administration psychiatric services[2]	187	214	206	171	204
Federally funded community mental health centers	65	247	...	...	...
Residential treatment centers for emotionally disturbed children	21	28	34	33	47
All other[3,4]	32	26	127	197	218
			Episodes per 100,000 civilian population		
All organizations	859.1	859.6	755.6	799.1	857.6
State and county mental hospitals	385.3	283.3	219.3	197.7	184.6
Private psychiatric hospitals	51.5	64.8	77.5	77.8	107.9
Non-Federal general hospital psychiatric services	269.0	267.6	297.3	351.3	369.0
Veterans Administration psychiatric services[2]	93.9	101.4	90.3	73.4	85.2
Federally funded community mental health centers	32.6	116.8	...	...	...
Residential treatment centers for emotionally disturbed children	10.7	13.4	15.1	14.0	19.7
All other[3,4]	16.1	12.3	56.1	84.9	91.2
			Days in thousands		
All organizations	168,934	104,970	77,053	81,821	83,421
State and county mental hospitals	134,185	70,584	44,558	42,427	39,075
Private psychiatric hospitals	4,237	4,401	5,578	6,010	8,570
Non-Federal general hospital psychiatric services	6,500	8,349	10,727	12,529	12,570
Veterans Administration psychiatric services[2]	17,206	11,725	7,591	7,425	7,754
Federally funded community mental health centers	1,924	3,718	...	...	...
Residential treatment centers for emotionally disturbed children	4,528	5,900	6,127	5,776	8,267
All other[3,4]	354	293	2,472	7,654	7,185

[1] In 1981, some organizations were reclassified and data for some organization types were not available, resulting in a particularly large increase for the all other category in 1981.
[2] Includes Veterans Administration neuropsychiatric hospitals and Veterans Administration general hospitals with separate psychiatric services.
[3] Includes other multiservice mental health organizations with inpatient and residential treatment services that are not elsewhere classified.
[4] Beginning in 1983 a definitional change sharply increased the number of multiservice mental health organizations while decreasing the number of freestanding psychiatric outpatient clinics. See Appendix I.

NOTE: Changes in reporting procedures in 1981 affect the comparability of data with those from previous years.

SOURCES: Survey and Reports Branch, Division of Biometry and Applied Sciences, National Institute of Mental Health: R. W. Manderscheid and S. A. Barrett: *Mental Health, United States, 1987*. DHHS Pub. No. (ADM) 87–1518. U.S. Government Printing Office, 1987; Unpublished data.

Table 78. Admissions to selected inpatient psychiatric organizations and rate per 100,000 civilian population, according to sex, age, and race: United States, selected years 1970–80

Sex, age, and race	State and county mental hospitals			Private psychiatric hospitals			Non-Federal general hospitals[1]		
	1970	1975	1980	1970	1975	1980	1971	1975	1980
Both sexes				Number in thousands					
Total	408	385	369	87	130	141	520	516	564
Under 18 years	26	25	17	6	15	17	44	43	44
18–24 years	77	72	77	12	19	23	91	93	98
25–44 years	159	166	177	32	47	56	222	220	249
45–64 years	111	102	78	27	35	32	127	121	123
65 years and over	35	21	20	10	13	14	36	38	50
White	317	296	265	84	119	123	439	451	469
All other	90	89	104	4	10	18	81	65	95
Male									
Total	241	249	239	36	56	67	240	212	255
Under 18 years	17	16	11	3	8	9	21	20	20
18–24 years	52	52	56	6	10	13	51	45	52
25–44 years	93	107	119	12	20	27	100	85	115
45–64 years	61	61	43	12	14	13	53	48	46
65 years and over	17	13	11	4	5	5	15	14	21
White	191	191	171	34	51	58	191	184	213
All other	50	58	68	2	5	9	48	27	42
Female									
Total	167	136	130	52	74	74	280	304	309
Under 18 years	9	9	5	3	8	7	23	23	23
18–24 years	25	20	22	6	9	10	40	48	45
25–44 years	66	59	58	20	28	29	122	135	135
45–64 years	50	41	35	15	21	18	74	74	77
65 years and over	17	8	9	6	8	9	21	24	29
White	127	105	94	49	69	65	247	267	256
All other	40	31	36	2	5	9	33	37	53
Both sexes				Rate per 100,000 civilian population					
Total	201.9	182.2	163.6	43.3	61.4	62.6	257.5	243.8	250.0
Under 18 years	37.8	38.1	26.1	9.3	23.3	26.3	63.3	64.4	68.5
18–24 years	338.3	271.8	264.6	53.5	73.7	79.6	399.3	352.8	334.2
25–44 years	335.4	314.1	282.9	66.6	89.3	89.1	467.6	416.8	399.0
45–64 years	264.2	233.5	175.7	64.8	80.1	71.0	303.5	278.5	276.4
65 years and over	172.3	91.8	78.0	50.0	57.7	54.1	179.7	170.3	195.4
White	179.5	161.1	136.8	47.2	64.9	63.4	248.0	245.4	241.8
All other	359.7	321.9	328.0	15.5	37.9	57.5	324.4	233.3	300.0
Male									
Total	247.3	243.7	219.8	36.8	54.5	61.9	246.6	207.1	233.8
Under 18 years	47.7	48.3	35.4	8.4	22.5	28.9	58.7	59.1	62.6
18–24 years	499.6	409.0	387.9	54.8	78.0	92.2	486.1	350.8	365.3
25–44 years	406.6	418.4	388.1	50.6	76.6	86.8	437.8	332.8	374.7
45–64 years	304.9	291.5	202.3	58.7	66.8	63.2	266.9	228.6	219.1
65 years and over	206.8	136.4	105.3	45.0	50.3	47.3	175.2	152.0	203.4
White	223.3	214.2	182.2	39.9	57.0	61.7	224.2	206.9	226.3
All other	419.7	444.5	457.8	14.5	38.1	62.7	408.2	209.1	281.1
Female									
Total	159.7	124.7	111.1	49.3	67.8	63.3	267.6	278.1	265.1
Under 18 years	27.5	27.5	16.4	10.2	24.1	23.6	68.1	70.0	74.6
18–24 years	200.3	143.1	145.8	52.4	69.6	67.4	325.0	354.6	304.4
25–44 years	269.3	215.9	182.3	81.5	101.2	91.2	495.2	495.8	422.2
45–64 years	227.0	180.5	151.7	70.3	92.3	78.1	336.9	324.3	328.2
65 years and over	147.5	60.8	59.6	53.6	62.8	58.8	183.0	182.9	190.0
White	138.7	111.2	94.1	54.1	72.5	65.0	270.3	281.7	256.4
All other	305.6	212.0	212.6	16.3	37.7	52.8	249.0	254.9	316.7

[1]Non-Federal general hospitals include public and nonpublic facilities.

SOURCES: Survey and Reports Branch, Division of Biometry and Applied Sciences, National Institute of Mental Health: C. A. Taube and S. A. Barrett: *Mental Health, United States, 1985*. DHHS Pub. No. (ADM) 85-1378. U.S. Government Printing Office, 1985; Unpublished data.

Table 79. Admissions to selected inpatient psychiatric organizations, according to selected primary diagnoses and age: United States, 1975 and 1980

Primary diagnosis and age	State and county mental hospitals		Private psychiatric hospitals		Non-Federal general hospitals[1]		Veterans Administration inpatient psychiatric services	
	1975	1980	1975	1980	1975	1980	1975	1980
	Number per 100,000 civilian population							
All diagnoses[2]								
All ages	182.2	163.6	61.4	62.6	243.8	250.0	103.5	70.4
Under 24 years	104.8	101.2	37.7	43.1	146.7	152.2	21.2	12.1
25–44 years	314.1	282.9	89.3	89.1	416.8	399.0	157.6	129.9
45–64 years	233.5	175.7	80.1	71.0	278.5	276.4	233.3	135.0
65 years and over	91.8	78.0	57.7	54.1	170.3	195.4	64.0	25.2
Alcohol related								
All ages	50.4	35.5	5.1	5.8	17.0	18.8	41.8	24.3
Under 24 years	10.7	12.4	0.4	1.4	*2.4	4.4	1.5	2.1
25–44 years	86.2	64.0	7.6	9.3	31.0	34.3	51.5	38.6
45–64 years	110.0	57.7	12.5	10.9	34.5	30.6	128.3	59.8
65 years and over	14.8	11.5	4.3	4.4	10.2	12.8	17.8	8.4
Drug related								
All ages	6.8	7.8	1.5	1.8	8.4	7.4	7.1	3.6
Under 24 years	7.2	9.4	1.5	1.8	7.7	7.8	5.3	1.2
25–44 years	12.6	12.9	2.3	3.0	13.8	9.3	16.5	10.1
45–64 years	*0.6	*1.4	*0.1	*1.0	*6.5	*7.1	2.9	*1.3
65 years and over	*3.5	*0.7	*0.4	*0.6	*2.6	*2.0	*0.3	*1.1
Organic disorders[3]								
All ages	9.6	6.8	2.5	2.2	9.0	7.4	5.6	1.8
Under 24 years	2.2	1.2	0.7	0.5	*1.1	*0.8	0.2	*0.1
25–44 years	6.4	4.7	1.1	0.9	5.4	5.6	2.2	*1.0
45–64 years	12.2	8.1	1.7	2.7	9.3	6.9	9.7	4.0
65 years and over	43.3	30.0	14.5	10.8	49.3	36.4	29.9	5.8
Affective disorders								
All ages	21.3	22.0	26.0	26.8	91.9	79.2	8.5	10.2
Under 24 years	7.5	9.1	9.5	13.5	35.3	32.2	1.2	1.1
25–44 years	40.6	36.9	39.4	38.9	160.9	123.7	11.7	15.6
45–64 years	29.4	32.4	43.3	36.3	135.6	113.8	22.2	24.4
65 years and over	16.8	14.3	29.6	29.2	78.5	81.0	4.1	5.0
Schizophrenia								
All ages	61.2	62.1	13.4	13.3	58.9	59.9	26.3	21.1
Under 24 years	35.9	36.6	11.1	10.6	42.0	38.3	8.6	5.1
25–44 years	125.8	125.0	23.8	22.5	118.0	114.5	52.2	45.4
45–64 years	63.5	54.8	11.3	11.6	50.3	53.6	42.6	30.9
65 years and over	9.3	13.9	2.7	3.6	*5.6	16.3	6.3	*2.3

[1]Non-Federal general hospitals include public and nonpublic facilities.
[2]Includes all other diagnoses not listed separately.
[3]Excludes alcohol and drug-related diagnoses.

*Based on fewer than 20 sample admissions.

NOTES: Primary diagnosis categories are based on the then current *International Classification of Diseases* and *Diagnostic and Statistical Manual of Mental Disorders*. For a listing of the code numbers, see Appendix II, table IX.

SOURCES: Survey and Reports Branch, Division of Biometry and Applied Sciences, National Institute of Mental Health: C. A. Taube and S. A. Barrett: *Mental Health, United States, 1985*. DHHS Pub. No. (ADM) 85-1378. U.S. Government Printing Office, 1985; Unpublished data.

Table 80. Persons employed in health service sites: United States, selected years 1970–87

[Data are based on household interviews of a sample of the civilian noninstitutionalized population]

Site	1970[1]	1975	1980	1981	1982	1983	1984	1985	1986	1987
					Number of persons in thousands					
All employed civilians	76,805	85,846	99,303	100,397	99,526	100,834	105,005	107,150	109,597	112,440
All health service sites	4,246	5,945	7,339	7,617	7,810	7,874	7,934	7,910	8,129	8,478
Offices of physicians	477	618	777	811	898	888	896	894	896	950
Offices of dentists	222	331	415	423	415	441	468	480	497	552
Offices of chiropractors [2]	19	30	40	46	53	54	61	59	66	72
Hospitals	2,690	3,441	4,036	4,186	4,341	4,348	4,288	4,269	4,368	4,444
Nursing and personal care facilities	509	891	1,199	1,230	1,217	1,342	1,362	1,309	1,339	1,337
Other health service sites	330	634	872	921	886	801	859	899	963	1,123
					Percent of employed civilians					
All health service sites	5.5	6.9	7.4	7.6	7.8	7.8	7.6	7.4	7.4	7.5
					Percent distribution					
All health service sites	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Offices of physicians	11.2	10.4	10.6	10.6	11.5	11.3	11.3	11.3	11.0	11.2
Offices of dentists	5.2	5.6	5.7	5.6	5.3	5.6	5.9	6.1	6.1	6.5
Offices of chiropractors [2]	0.4	0.5	0.5	0.6	0.7	0.7	0.8	0.7	0.8	0.8
Hospitals	63.4	57.9	55.0	55.0	55.6	55.2	54.0	54.0	53.7	52.4
Nursing and personal care facilities	12.0	15.0	16.3	16.1	15.6	17.0	17.2	16.5	16.5	15.8
Other health service sites	7.8	10.7	11.9	12.1	11.3	10.2	10.8	11.4	11.8	13.2

[1] April 1, derived from decennial census; all other data years are annual averages from the Current Population Survey.
[2] Data for 1980–82 are from the American Chiropractic Association; data for all other years are from the U.S. Bureau of Labor Statistics.

NOTES: Totals exclude persons in health-related occupations who are working in nonhealth industries, as classified by the U.S. Bureau of the Census, such as pharmacists employed in drugstores, school nurses, and nurses working in private households. Totals include Federal, State, and county health workers. In 1970–82, employed persons were classified according to the industry groups used in the 1970 Census of Population. Beginning in 1983, persons were classified according to the system used in the 1980 Census of Population.

SOURCES: U.S. Bureau of the Census: 1970 Census of Population, occupation by industry. *Subject Reports*. Final Report PC(2)-7C. Washington. U.S. Government Printing Office, Oct. 1972; U.S. Bureau of Labor Statistics: *Labor Force Statistics Derived From the Current Population Survey: A Databook, Vol. I*. Washington. U.S. Government Printing Office, Sept. 1982; *Employment and Earnings, January 1983–88*. Vol. 30, No. 1, Vol. 31. No. 1, Vol. 32, No. 1, Vol. 33, No. 1, Vol. 34, No. 1, and Vol. 35, No. 1. Washington. U.S. Government Printing Office, Jan. 1983–88; American Chiropractic Association: Unpublished data.

Table 81 (page 1 of 2). Active non-Federal physicians per 10,000 civilian population, according to geographic division, State, and primary specialty: United States, 1975, 1985, and 1986

Geographic division and State	Total physicians[1]			Doctors of medicine[2]					
				Patient care[3]			Primary care[4]		
	1975	1985	1986	1975	1985	1986	1975	1985	1986
	Number per 10,000 civilian population								
United States	15.3	20.7	20.9	13.5	18.0	18.4	4.1	5.4	5.3
New England	19.1	26.7	27.1	16.9	22.9	23.6	4.6	6.2	6.0
Maine	12.8	18.7	18.9	10.7	15.6	15.7	3.8	5.4	5.4
New Hampshire	14.3	18.1	18.1	13.1	16.7	16.8	4.6	5.6	5.7
Vermont	18.2	23.8	23.9	15.5	20.3	20.9	5.2	6.5	6.6
Massachusetts	20.8	30.2	30.6	18.3	25.4	26.4	4.7	6.4	6.1
Rhode Island	17.8	23.3	24.1	16.1	20.2	21.0	4.4	5.5	5.3
Connecticut	19.8	27.8	28.1	17.7	24.3	24.9	4.7	6.4	6.3
Middle Atlantic	19.5	26.1	26.6	17.0	22.2	22.9	4.5	5.9	5.8
New York	22.7	29.0	29.5	20.2	25.2	26.1	5.1	6.3	6.2
New Jersey	16.2	23.4	23.8	14.0	19.8	20.4	4.1	5.5	5.5
Pennsylvania	16.6	23.6	24.1	13.9	19.2	19.7	4.0	5.4	5.3
East North Central	13.9	19.3	19.5	12.0	16.4	16.7	3.7	5.0	4.9
Ohio	14.1	19.9	20.2	12.2	16.8	17.0	3.7	4.8	4.7
Indiana	10.6	14.7	14.8	9.6	13.2	13.5	3.8	4.6	4.5
Illinois	14.5	20.5	20.7	13.1	18.2	18.5	4.1	5.5	5.6
Michigan	15.4	20.8	20.8	12.0	16.0	16.0	3.2	4.5	4.3
Wisconsin	12.5	17.7	17.9	11.4	15.9	16.3	4.0	5.4	5.4
West North Central	13.3	18.3	18.6	11.4	15.6	15.9	3.8	5.2	5.1
Minnesota	14.9	20.5	20.5	13.7	18.5	18.8	4.6	6.5	6.3
Iowa	11.4	15.6	16.0	9.4	12.4	12.8	3.5	4.3	4.3
Missouri	15.0	20.5	20.9	11.6	16.3	16.6	3.3	4.7	4.5
North Dakota	9.7	15.8	15.7	9.2	14.9	14.8	4.1	5.8	5.5
South Dakota	8.2	13.4	13.1	7.7	12.3	12.1	3.4	5.0	5.1
Nebraska	12.1	15.7	16.1	10.9	14.4	14.9	4.2	5.3	5.3
Kansas	12.8	17.3	17.5	11.2	15.1	15.3	3.9	5.2	5.1
South Atlantic	14.0	19.7	20.3	12.6	17.6	18.1	3.7	5.2	5.2
Delaware	14.3	19.7	19.6	12.7	17.1	17.2	3.8	4.7	4.6
Maryland	18.6	30.4	30.7	16.5	24.9	25.9	4.2	6.5	6.4
District of Columbia	39.6	55.3	56.0	34.6	45.6	46.7	7.2	10.3	9.9
Virginia	12.9	19.5	19.9	11.9	17.8	18.3	3.8	5.4	5.4
West Virginia	11.0	16.3	16.8	10.0	14.6	14.9	3.3	4.4	4.5
North Carolina	11.7	16.9	17.1	10.6	15.0	15.5	3.5	4.7	4.7
South Carolina	10.0	14.7	15.1	9.3	13.6	14.1	3.3	4.5	4.5
Georgia	11.5	16.2	16.3	10.6	14.7	15.0	3.3	4.3	4.3
Florida	15.2	20.2	20.6	13.4	17.8	18.2	3.9	5.3	5.4
East South Central	10.5	15.0	15.4	9.7	14.0	14.4	3.2	4.5	4.6
Kentucky	10.9	15.1	15.4	10.1	13.9	14.4	3.6	4.8	4.8
Tennessee	12.4	17.7	18.0	11.3	16.2	16.7	3.2	4.7	4.8
Alabama	9.2	14.2	14.5	8.6	13.1	13.5	3.0	4.2	4.3
Mississippi	8.4	11.8	12.2	8.0	11.1	11.5	3.1	4.2	4.2
West South Central	11.9	16.4	16.7	10.5	14.5	14.8	3.5	4.5	4.4
Arkansas	9.1	13.8	14.1	8.5	12.8	13.2	3.4	4.8	4.8
Louisiana	11.4	17.3	17.5	10.5	16.1	16.4	3.3	4.5	4.3
Oklahoma	11.6	16.1	16.4	9.4	12.9	13.1	3.2	4.0	4.2
Texas	12.5	16.8	16.9	11.0	14.7	14.9	3.6	4.5	4.4
Mountain	14.3	17.8	18.0	12.6	15.7	15.8	4.1	5.0	4.9
Montana	10.6	14.0	14.5	10.1	13.2	13.7	4.5	5.4	5.4
Idaho	9.5	12.1	12.0	8.9	11.4	11.4	4.0	4.8	4.7
Wyoming	9.5	12.9	12.6	8.9	12.0	11.9	4.1	4.6	4.7
Colorado	17.3	20.7	20.8	15.0	17.7	17.8	4.8	5.6	5.4
New Mexico	12.2	17.0	17.1	10.1	14.7	14.9	3.4	4.8	4.8
Arizona	16.7	20.2	20.3	14.1	17.1	17.1	4.2	5.1	4.9
Utah	14.1	17.2	17.4	13.0	15.5	15.8	3.8	4.4	4.4
Nevada	11.9	16.0	16.1	10.9	14.5	14.6	3.6	4.6	4.4

See footnotes at end of table.

Table 81 (page 2 of 2). Active non-Federal physicians per 10,000 civilian population, according to geographic division, State, and primary specialty: United States, 1975, 1985, and 1986

Geographic division and State	Total physicians[1]			Doctors of medicine[2]					
				Patient care[3]			Primary care[4]		
	1975	1985	1986	1975	1985	1986	1975	1985	1986
Pacific	17.9	22.5	22.7	16.3	20.5	20.6	5.2	6.6	6.4
Washington	15.3	20.2	20.3	13.6	17.9	18.0	4.7	6.3	6.2
Oregon	15.6	19.7	19.7	13.8	17.6	17.7	4.6	6.1	6.0
California	18.8	23.7	23.5	17.3	21.5	21.4	5.5	6.7	6.5
Alaska	8.4	13.0	13.7	7.8	12.1	12.7	3.5	5.6	5.8
Hawaii	16.2	21.5	22.2	14.7	19.8	20.3	4.9	7.0	6.9

[1]Includes active non-Federal doctors of medicine and doctors of osteopathy in all other specialties not shown separately. Total physicians for 1985 include 1984 data for doctors of osteopathy.
[2]Excludes doctors of osteopathy; States with large numbers are Florida, Michigan, Missouri, New Jersey, Ohio, Pennsylvania, and Texas.
[3]Excludes doctors of medicine in medical teaching, administration, research, and other nonpatient care activities.
[4]Includes doctors of medicine in patient care office-based general practice and family practice, internal medicine, and pediatrics.

SOURCES: Compiled by Health Resources and Services Administration, Bureau of Health Professions based on data from the American Medical Association: *Physician Distribution and Licensure in the U.S., 1975, Physician Characteristics and Distribution in the U.S., 1986 Edition,* and *Physician Characteristics and Distribution in the U.S., 1987 Edition;* American Osteopathic Association: *1975-76 Yearbook and Directory of Osteopathic Physicians, 1985-86 Yearbook and Directory of Osteopathic Physicians,* and *1986-87 Yearbook and Directory of Osteopathic Physicians.*

Table 82. Active physicians, according to type of physician, and number per 10,000 population: United States and outlying U.S. areas, selected 1950–88 estimates and 1990 and 2000 projections

[Data are based on reporting by physicians and medical schools]

Year	All active physicians	Doctors of medicine	Doctors of osteopathy	Active physicians per 10,000 population
		Number of physicians		
1950	219,900	209,000	10,900	14.1
1960	259,400	247,300	12,200	14.0
1970	326,500	314,200	12,300	15.6
1971	337,400	325,000	12,400	16.1
1972	348,300	335,500	12,800	16.4
1973	355,700	342,500	13,200	16.4
1974	370,000	356,400	13,600	16.9
1975	384,500	370,400	14,100	17.4
1976	399,500	385,000	14,500	17.9
1977	405,900	390,800	15,100	18.0
1978	424,000	408,300	15,700	18.6
1979	440,400	424,000	16,400	19.1
1980	457,500	440,400	17,100	19.7
1981	466,600	448,700	18,000	19.9
1982	483,700	465,000	18,700	20.5
1983	501,200	481,500	19,700	21.1
1984	---	---	20,800	---
1985	534,800	512,900	21,900	22.0
1988	545,000	521,800	23,200	22.5
Projections				
1990	597,000	569,200	27,800	23.9
2000	708,600	667,700	40,900	26.4

NOTES: Population estimates include residents in the United States, Puerto Rico, and other U.S. outlying areas; U.S. citizens in foreign countries; and the Armed Forces in the United States and abroad. For 1980 and 2000, the Series II projections of the total population from the U.S. Bureau of the Census are used. Estimation and projection methods are from the Bureau of Health Professions. The numbers for doctors of medicine differ from American Medical Association figures because physicians not classified by activity status and whose addresses are unknown are included in this table.

SOURCES: Bureau of Health Professions: *Sixth Report to the President and Congress on the Status of Health Personnel in the United States*. Health Resources and Services Administration. DHHS Pub. No. HRS-P-OD-88-1, Rockville, Md., 1988; Unpublished data.

Copyright material has been deleted, not available for Microfiche Edition.

Table 84. Active health personnel and number per 100,000 population, according to occupation and geographic region: United States, 1970, 1980, and 1986

Year and occupation	Number of active health personnel	United States	Geographic region			
			Northeast	Midwest	South	West
		Number per 100,000 population[1]				
1970						
Physicians	---	---	---	---	---	---
Federal	---	---	---	---	---	---
Non-Federal	290,862	142.7	185.0	127.5	114.8	158.2
Doctors of medicine[2,3]	279,212	137.0	178.7	118.2	111.5	154.8
Doctors of osteopathy	11,650	5.7	6.3	9.3	3.3	3.4
Dentists[4]	95,700	47.0	58.9	46.3	35.3	54.9
Optometrists	18,400	9.0	9.7	10.3	6.6	10.5
Pharmacists[2]	112,570	55.4	60.1	57.5	50.6	52.9
Podiatrists	7,110	3.5	6.0	3.6	1.6	3.0
Registered nurses	750,000	368.9	491.2	367.5	281.8	355.9
Veterinarians	25,900	12.7	8.3	16.1	11.8	15.0
1980						
Physicians	427,028	189.8	---	---	---	---
Federal	17,548	7.8	---	---	---	---
Non-Federal	409,480	182.0	224.5	165.2	157.0	200.0
Doctors of medicine[2,3]	393,407	174.9	218.1	153.3	152.8	195.8
Doctors of osteopathy	16,073	7.1	6.4	11.9	4.2	4.2
Dentists[4]	121,240	53.5	68.2	52.7	42.6	59.2
Optometrists	22,330	9.8	9.9	10.9	7.7	11.6
Pharmacists[2]	142,780	62.5	66.5	67.8	62.1	51.8
Podiatrists	8,880	4.0	6.3	3.9	2.5	4.1
Registered nurses	1,272,900	560.0	736.0	583.6	443.4	533.7
Associate and diploma	808,300	399.9	536.0	429.2	316.5	351.1
Baccalaureate	297,300	130.9	161.0	127.8	103.8	148.1
Masters and doctorate	67,300	29.6	39.0	26.7	23.0	34.6
Veterinarians	36,000	16.3	10.8	19.9	16.0	18.5
1986						
Physicians	521,833	218.0	---	---	---	---
Federal	21,596	9.0	---	---	---	---
Non-Federal	500,237	209.0	267.5	192.4	182.4	214.1
Doctors of medicine[2,3]	478,362	199.9	256.2	177.4	176.5	208.9
Doctors of osteopathy	21,875	9.1	11.3	15.0	5.9	5.3
Dentists[4]	137,900	57.3	68.5	59.9	46.5	61.2
Optometrists	24,300	10.1	---	---	---	---
Pharmacists[2]	161,500	67.1	---	---	---	---
Podiatrists	---	---	---	---	---	---
Registered nurses	1,592,600	660.6	838.9	719.9	547.9	597.6
Associate and diploma	1,048,370	434.9	556.3	488.6	360.9	370.8
Baccalaureate	444,130	184.2	223.9	191.8	154.0	185.7
Masters and doctorate	100,100	41.5	58.9	39.4	32.7	41.3
Veterinarians	43,500	18.1	15.2	21.5	16.3	19.4

[1]Ratios for physicians and dentists are based on civilian population; ratios for all other health occupations are based on resident population.
[2]Excludes United States possessions.
[3]Excludes physicians not classified according to activity status.
[4]Excludes dentists in military service.

NOTE: Some numbers in this table have been revised and differ from previous editions of *Health, United States*.

SOURCES: Division of Health Professions Analysis, Bureau of Health Professions: *Supply and Characteristics of Selected Health Personnel*. DHHS Pub. No. (HRA) 81-20. Health Resources Administration. Hyattsville, Md., June 1981; *Sixth Report to the President and Congress on the Status of Health Personnel in the United States*. Health Resources and Services Administration. DHHS Pub. No. HRS-P-OD-89-1, Rockville, Md., 1989; Unpublished data; American Medical Association: *Physician Characteristics and Distribution in the U.S.*, 1981 Edition. Chicago, 1981; *Physician Characteristics and Distribution in the U.S.*, 1987 Edition. Chicago, 1987; American Osteopathic Association: *1980-81 Yearbook and Directory of Osteopathic Physicians*. Chicago, 1980; *1986-87 Yearbook and Directory of Osteopathic Physicians*. Chicago, 1986.

Table 85. Full-time equivalent employment in selected occupations for community hospitals: United States, 1981 and 1984–86

[Data are based on reporting by a census of registered hospitals]

Occupation	1981	1984	1985	1986	Average annual percent change 1981–84	Average annual percent change 1984–86
All hospital personnel[1]	3,069,955	3,050,767	3,024,929	3,055,071	–0.2	0.1
Administrators and assistant administrators	28,734	30,336	30,174	32,990	4.3	4.3
Registered nurses	629,354	697,840	709,253	736,253	3.5	2.7
Licensed practical nurses	234,226	204,559	186,780	174,154	–4.4	–7.7
Ancillary nursing personnel	280,614	259,220	235,853	226,821	–2.6	–6.5
Medical record administrators and technicians	38,186	40,526	41,199	44,057	2.0	4.3
Licensed pharmacists and pharmacy technicians	47,053	52,096	52,973	54,679	3.5	2.4
Medical technologists and other laboratory personnel	147,451	146,677	144,831	145,622	–0.2	–0.4
Dietitians and dietetic technicians	40,192	34,817	33,305	34,241	–4.7	–0.8
Radiologic service personnel	90,738	90,764	91,353	94,683	0.0	2.1
Occupational therapists and recreational therapists	8,481	9,559	10,030	11,210	4.1	8.3
Physical therapists and physical therapy assistants and aides	27,675	28,485	29,064	30,216	1.0	3.0
Speech pathologists and audiologists	2,463	2,964	3,253	3,776	6.4	12.9
Respiratory therapists and respiratory therapy technicians	47,312	51,111	51,056	52,751	2.6	1.6
Medical social workers	13,915	14,927	15,192	16,042	2.4	3.7
Total trainee personnel[2]	66,906	66,918	63,367	67,366	0.0	0.3

[1]Includes occupational categories not shown.
[2]This category is primarily composed of medical residents.

SOURCE: Compiled by the Office of Data Analysis and Management, Bureau of Health Professions, from the American Hospital Association's 1981, 1984, 1985, and 1986 Annual Survey of Hospitals.

Table 86. First-year enrollment and graduates of health professions schools and number of schools, according to profession: United States, selected 1950–87 estimates and 1990 and 2000 projections

[Data are based on reporting by health professions schools]

Year	Medicine	Osteopathy	Nursing[1]	Dentistry	Optometry	Pharmacy	Chiropractic
First-year enrollment							
1980	17,014	1,426	105,952	6,132	1,202	8,035	---
1981	17,204	1,496	110,201	6,030	1,258	7,551	---
1982	17,320	1,582	115,279	5,855	1,249	6,899	---
1983	17,230	1,662	120,579	5,498	1,147	6,574	---
1984	17,175	1,746	123,824	5,274	1,219	6,715	---
1985	16,992	1,750	118,224	5,047	1,187	6,849	---
1986	16,929	1,737	100,791	4,843	1,251	7,084	---
1987	16,779	1,724	92,219	4,554	---	---	---
Graduates							
1950	5,553	373	25,790	2,565	961	---	---
1960	7,081	427	29,853	3,253	364	3,497	660
1970	8,367	432	43,103	3,749	445	4,758	642
1975	12,714	702	73,915	4,969	806	6,712	1,093
1980	15,135	1,059	75,523	5,256	1,073	7,278	2,049
1981	15,667	1,151	73,985	5,550	980	7,362	2,526
1982	15,985	1,017	74,052	5,371	1,020	6,859	2,631
1983	15,824	1,317	77,408	5,756	1,040	6,374	2,948
1984	16,327	1,415	80,312	5,337	1,089	5,964	---
1985	16,319	1,474	82,075	5,353	1,163	5,735	---
1986	16,125	1,560	77,127	4,957	1,114	5,900	---
1987	15,872	1,610	70,333	---	---	---	---
1990	16,453	1,606	71,800	4,140	1,030	5,760	2,860
2000	15,639	1,700	63,100	3,350	1,030	5,110	2,950
Schools[2]							
1950	79	6	1,304	42	10	---	20
1960	86	6	1,128	47	10	76	12
1970	103	7	1,340	53	11	74	11
1975	114	9	1,362	59	12	73	12
1980	126	14	1,385	60	15	72	14
1981	126	15	1,401	60	16	72	16
1982	127	15	1,432	60	16	72	16
1983	127	15	1,466	60	16	72	17
1984	127	15	1,477	60	16	72	17
1985	127	15	1,473	60	16	72	17
1986	127	15	1,469	59	16	73	17
1987	127	15	1,463	58	16	74	---

[1]Registered nurses only.
[2]Some nursing schools offer more than one type of program. Numbers shown for nursing are number of nursing programs.

NOTE: Some numbers in this table have been revised and differ from previous editions of *Health, United States*.

SOURCES: Bureau of Health Professions: *Sixth Report to the President and Congress on the Status of Health Personnel in the United States*. Health Resources and Services Administration. DHHS Pub. No. HRS-P-OD-88-1, Rockville, Md., 1988; Health Resources and Services Administration: Unpublished data; National League for Nursing: *Nursing Student Census, 1987*. New York, 1988; American Dental Association Council on Dental Education: *Annual Report on Dental Education 1986–87*. Chicago, 1987; American Medical Association: Medical education in the United States. *JAMA*, Vol. 258, No. 8. August 28, 1987; American Association of Colleges of Osteopathic Medicine: *Annual Statistical Report 1987*. Rockville, Md., 1987; American Chiropractic Association: Unpublished data.

Table 87. Total and first-year enrollment of minorities and women in schools for selected health occupations: United States, academic years 1976–77 and 1986–87

Enrollment and health occupation	All races, both sexes		Black		Other minority		Women	
	1976–77[1]	1986–87[2]	1976–77[1]	1986–87[2]	1976–77[1]	1986–87[2]	1976–77[1]	1986–87[2]
Total enrollment	Number of students		Percent of students					
Medicine:								
Allopathic	57,765	66,125	6.1	5.9	5.6	13.1	24.7	33.4
Osteopathic	3,671	6,640	1.9	1.8	2.3	7.0	12.9	27.9
Podiatry	2,295	2,832	3.2	7.6	2.7	7.4	6.8	23.7
Dentistry[3]	20,790	18,403	4.6	5.6	5.5	14.4	11.2	27.1
Optometry	4,033	4,562	2.2	2.4	5.2	12.9	13.4	33.2
Pharmacy[4]	23,465	25,643	4.0	6.7	4.9	11.0	36.8	58.6
Veterinary medicine	6,571	8,887	---	2.3	---	3.9	27.3	53.0
Registered nurses[5]	239,486	193,712	5.8	6.4	2.7	3.7	93.7	95.6
First-year enrollment								
Medicine:								
Allopathic	15,613	16,819	6.7	7.0	6.3	15.0	24.7	35.0
Osteopathic	1,088	1,724	2.4	1.5	3.0	8.0	16.5	27.3
Podiatry	650	815	3.8	9.6	3.2	10.3	---	---
Dentistry[3]	5,869	4,494	4.9	6.4	6.1	17.0	13.5	30.1
Optometry	1,111	1,251	---	---	---	---	15.5	39.0
Pharmacy	8,208	6,584	4.5	6.0	4.9	10.4	33.2	54.5
Veterinary medicine	1,866	2,273	---	---	---	---	33.7	58.5
Registered nurses[5]	110,950	100,791	7.2	9.3	3.9	5.3	95.3	93.4

[1]Data for registered nurses are for 1977–78.
[2]Data for total enrollment for optometry and registered nurses and for first-year enrollment for optometry, pharmacy, and registered nurses are for 1985–86.
[3]Excludes Puerto Rican schools.
[4]Prior to 1986–87, pharmacy enrollments are for students in the final 3 years of pharmacy education. Beginning in 1986–87, data for all pharmacy students are shown.
[5]Percent distribution based only on schools reporting minority data.

SOURCES: Bureau of Health Professions: *Minorities and Women in the Health Fields, 1978.* DHEW Pub. No. (HRA) 79–22. Health Resources Administration. Washington. U.S. Government Printing Office, Oct. 1978; *Minorities and Women in the Health Fields, 1984 Edition.* DHHS Pub. No. (HRSA) HRS-DV 84-5. Health Resources and Services Administration. Washington. U.S. Government Printing Office, Sept. 1984; *Minorities and Women in the Health Fields, 1987 Edition.* DHHS Pub. No. (HRSA) HRS-P-DV 87-1. Rockville, Md., Sept. 1987; and *Sixth Report to the President and Congress on the Status of Health Personnel in the United States.* Health Resources and Services Administration. DHHS Pub. No. HRS-P-OD-88-1, Rockville, Md., 1988; American Association of Colleges of Osteopathic Medicine: *Annual Statistical Report, 1987.* Rockville, Md., 1987; National League for Nursing: *Nursing Student Census, 1987.* New York, 1988.

Table 88. Total and first-year enrollment and percent of women in schools of medicine, according to race and ethnicity: United States, academic years 1971–72, 1977–78, and 1986–87

Enrollment and race/ethnicity	Both sexes			Women		
	1971–72	1977–78	1986–87	1971–72	1977–78	1986–87
Total enrollment	Number of students			Percent of students		
All races	43,650	60,039	66,125	10.9	23.7	33.4
White	---	51,974	53,136	---	22.4	32.1
Minority	3,072	6,728	12,538	19.0	33.0	39.2
Black	2,055	3,587	3,892	20.4	38.2	49.2
Mexican American	252	831	1,153	9.5	22.7	34.2
Mainland Puerto Rican	76	261	435	17.1	34.1	37.2
Other Hispanic	---	426	1,933	---	23.2	34.0
American Indian	42	201	242	23.8	27.4	41.7
Asian	647	1,422	4,883	17.9	29.3	34.6
First-year enrollment						
All races	12,361	16,136	16,819	13.7	25.6	35.0
White	---	13,732	12,967	---	24.1	33.3
Minority	1,280	2,002	3,703	20.6	35.2	41.0
Black	882	1,085	1,174	22.7	40.8	51.1
Mexican American	118	246	331	8.5	26.8	36.6
Mainland Puerto Rican	40	68	111	15.0	33.8	40.5
Other Hispanic	---	157	512	---	27.4	37.9
American Indian	23	51	61	34.8	29.4	41.0
Asian	217	395	1,514	19.4	29.1	35.3

SOURCE: Based on data reported by the Association of American Medical Colleges in Bureau of Health Professions: *Minorities and Women in the Health Fields, 1984*. DHHS Pub. No. (HRSA) HRS-DV 84-9. Health Resources and Services Administration. Washington. U.S. Government Printing Office. Sept. 1984; Unpublished data from the Association of American Medical Colleges.

Copyright material has been deleted, not available for Microfiche Edition.

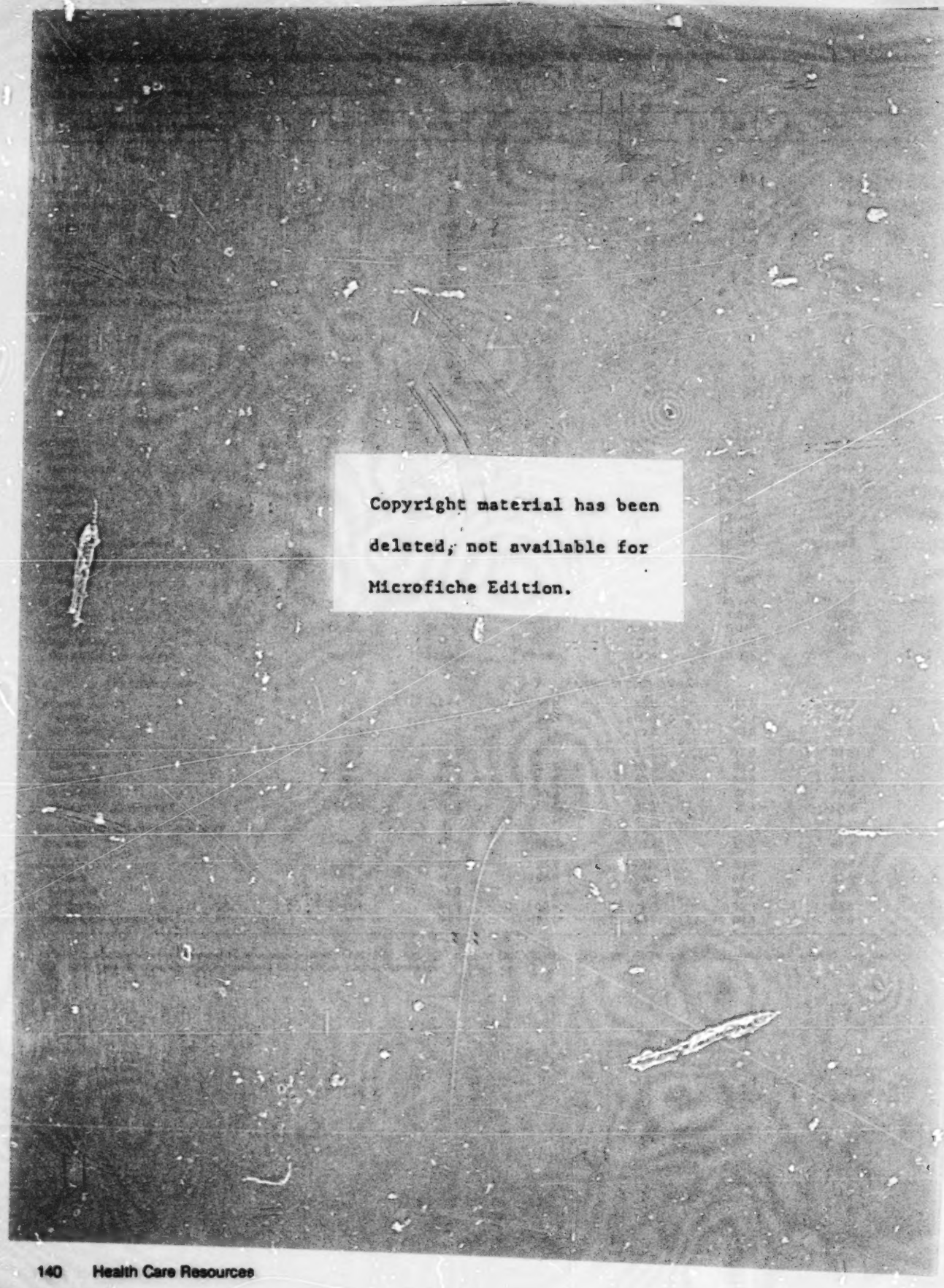

Copyright material has been
deleted, not available for
Microfiche Edition.

Table 91. Inpatient and residential treatment beds in mental health organizations and rate per 100,000 civilian population, according to type of organization: United States, selected years 1970–86

[Data are based on inventories of mental health organizations]

Organization	1970	1976	1980[1]	1982[2]	1984	1986
			Number			
All organizations	524,878	338,963	274,713	247,312	262,673	267,838
State and county mental hospitals	413,066	222,202	156,482	140,140	130,411	119,033
Private psychiatric hospitals	14,295	16,091	17,157	19,011	21,474	30,204
Non-Federal general hospital psychiatric services	22,394	28,706	29,384	36,525	46,045	45,808
Veterans Administration psychiatric services[3]	50,688	35,913	33,796	24,646	23,546	26,875
Federally funded community mental health centers	8,108	17,029	16,264	...	...	...
Residential treatment centers for emotionally disturbed children	15,129	18,029	20,197	18,475	16,745	24,547
All other[4,5]	1,196	993	1,433	8,515	24,452	21,171
			Number per 100,000 civilian population			
All organizations	263.6	160.3	124.3	108.1	112.9	111.8
State and county mental hospitals	207.4	105.1	70.2	61.2	56.1	49.7
Private psychiatric hospitals	7.2	7.6	7.7	8.3	9.2	12.6
Non-Federal general hospital psychiatric services	11.2	13.6	13.7	16.0	19.8	19.1
Veterans Administration psychiatric services[3]	25.5	17.0	15.7	10.8	10.1	11.2
Federally funded community mental health centers	4.1	8.0	7.3	...	...	...
Residential treatment centers for emotionally disturbed children	7.6	8.5	9.1	8.1	7.2	10.3
All other[4,5]	0.6	0.5	0.6	3.7	10.5	8.9

[1]During 1979–80, comparable data were not available for certain organization types, and data for either an earlier or later period were substituted.
[2]During 1981–82, some organizations were reclassified and data for some organization types were not available, resulting in a particularly large increase for the all other category in 1981.
[3]Includes Veterans Administration neuropsychiatric hospitals and Veterans Administration general hospitals with separate psychiatric services.
[4]Includes other multiservice mental health organizations with inpatient and residential treatment services that are not elsewhere classified.
[5]Beginning in 1983 a definitional change sharply increased the number of multiservice mental health organizations while decreasing the number of freestanding psychiatric outpatient clinics. See Appendix I.

NOTE: Changes in reporting procedures in 1979–80 and 1981–82 affect the comparability of data with those from previous years.

SOURCES: Survey and Reports Branch, Division of Biometry and Applied Sciences, National Institute of Mental Health: R. W. Manderscheid and S. A. Barrett: *Mental Health, United States, 1987*. DHHS Pub. No. (ADM) 87–1518. U.S. Government Printing Office, 1987; Unpublished data.

Table 92 (page 1 of 2). Community hospital beds per 1,000 population and average annual percent change, according to geographic division and State: United States, selected years 1940–86

[Data are based on reporting by facilities]

Geographic division and State	Beds per 1,000 civilian population							Average annual percent change			
	1940[1]	1950[1]	1960[2]	1970	1980	1985	1986	1940–60[1,2]	1960–70[2]	1970–80	1980–86
United States	3.2	3.3	3.6	4.3	4.5	4.2	4.1	0.6	1.8	0.5	–1.5
New England	4.4	4.2	3.9	4.1	4.1	4.0	3.8	–0.6	0.5	0.0	–1.3
Maine	3.0	3.2	3.4	4.7	4.7	4.2	4.2	0.6	3.3	0.0	–1.9
New Hampshire	4.2	4.2	4.4	4.0	3.9	3.4	3.3	0.2	–0.9	–0.3	–2.7
Vermont	3.[illegible]	4.0	4.5	4.5	4.4	3.8	4.0	1.6	0.0	–0.2	–1.6
Massachusetts	5.1	4.8	4.2	4.4	4.4	4.4	4.3	–1.0	0.5	0.0	–0.4
Rhode Island	3.9	3.8	3.7	4.0	3.8	3.6	3.5	–0.3	0.8	–0.5	–1.4
Connecticut	3.7	3.6	3.4	3.4	3.5	3.3	3.1	–0.4	0.0	0.3	–2.0
Middle Atlantic	3.9	3.8	4.0	4.4	4.6	4.4	4.3	0.1	1.0	0.4	–1.1
New York	4.3	4.1	4.3	4.6	4.5	4.4	4.3	0.0	0.7	–0.2	–0.8
New Jersey	3.5	3.2	3.1	3.6	4.2	3.9	3.9	–0.6	1.5	1.6	–1.2
Pennsylvania	3.5	3.8	4.1	4.7	4.8	4.7	4.6	0.8	1.4	0.2	–0.7
East North Central	3.2	3.2	3.6	4.4	4.7	4.5	4.3	0.6	2.0	0.7	–1.5
Ohio	2.7	2.9	3.4	4.2	4.7	4.6	4.4	1.2	2.1	1.1	–1.1
Indiana	2.3	2.6	3.1	4.0	4.5	4.2	4.2	1.5	2.6	1.2	–1.1
Illinois	3.4	3.6	4.0	4.7	5.1	4.7	4.5	0.8	1.6	0.8	–2.1
Michigan	4.0	3.3	3.3	4.3	4.4	4.1	4.0	–1.0	2.7	0.2	–1.6
Wisconsin	3.4	3.7	4.3	5.2	4.9	4.6	4.5	1.2	1.9	–0.6	–1.4
West North Central	3.1	3.7	4.3	5.7	5.8	5.4	5.3	1.6	2.9	0.2	–1.5
Minnesota	3.9	4.4	4.6	6.1	5.7	5.2	5.0	1.0	2.4	–0.7	–2.2
Iowa	2.7	3.2	3.9	5.6	5.7	5.2	5.2	1.9	3.7	0.2	–1.5
Missouri	2.9	3.3	3.9	5.1	5.7	5.2	5.1	1.5	2.7	1.1	–1.8
North Dakota	3.5	4.3	5.2	6.8	7.4	7.4	7.2	2.0	2.7	0.8	–0.5
South Dakota	2.8	4.4	4.5	5.6	5.5	6.6	6.5	2.4	2.2	–0.2	2.8
Nebraska	3.4	4.2	4.4	6.2	6.0	6.0	5.9	1.3	3.5	–0.3	–0.3
Kansas	2.8	3.4	4.2	5.4	5.8	5.2	5.0	2.0	2.5	0.7	–2.4
South Atlantic	2.5	2.8	3.3	4.0	4.5	4.1	4.0	1.4	1.9	1.2	–1.9
Delaware	4.4	3.9	3.7	3.7	3.6	3.5	3.4	–0.9	0.0	–0.3	–0.9
Maryland	3.9	3.6	3.3	3.1	3.6	3.4	3.3	–0.8	–0.6	1.5	–1.4
District of Columbia	5.5	5.5	5.9	7.4	7.3	7.8	7.7	0.4	2.3	–0.1	0.9
Virginia	2.2	2.5	3.0	3.7	4.1	3.8	3.7	1.6	2.1	1.0	–1.7
West Virginia	2.7	3.1	4.1	5.4	5.5	5.1	5.1	2.1	2.8	0.2	–1.3
North Carolina	2.2	2.6	3.4	3.8	4.2	3.7	3.5	2.2	1.1	1.0	–3.0
South Carolina	1.8	2.4	2.9	3.7	3.9	3.6	3.4	2.4	2.5	0.5	–2.3
Georgia	1.7	2.0	2.8	3.8	4.6	4.3	4.3	2.5	3.1	1.9	–1.1
Florida	2.8	2.9	3.1	4.4	5.1	4.6	4.4	0.5	3.6	1.5	–2.4
East South Central	1.7	2.1	3.0	4.4	5.1	5.0	5.0	2.9	3.9	1.5	–0.3
Kentucky	1.8	2.2	3.0	4.0	4.5	4.4	4.4	2.6	2.9	1.2	–0.4
Tennessee	1.9	2.3	3.4	4.7	5.5	5.3	5.3	3.0	3.3	1.6	–0.6
Alabama	1.5	2.0	2.8	4.3	5.1	5.0	5.0	3.2	4.4	1.7	–0.3
Mississippi	1.4	1.7	2.9	4.4	5.3	5.2	5.2	3.7	4.3	1.9	–0.3
West South Central	2.1	2.7	3.3	4.3	4.7	4.2	4.0	2.3	2.7	0.9	–2.7
Arkansas	1.4	1.6	2.9	4.2	5.0	4.8	4.7	3.7	3.8	1.8	–1.0
Louisiana	3.1	3.8	3.9	4.2	4.8	4.6	4.5	1.2	0.7	1.3	–1.1
Oklahoma	1.9	2.5	3.2	4.5	4.6	4.1	4.0	2.6	3.5	0.2	–2.3
Texas	2.0	2.7	3.3	4.3	4.7	4.1	3.8	2.5	2.7	0.9	–3.5
Mountain	3.6	3.8	3.5	4.3	3.8	3.5	3.4	–0.1	2.1	–1.2	–1.8
Montana	4.9	5.3	5.1	5.8	5.9	5.5	5.7	0.2	1.3	0.2	–0.6
Idaho	2.6	3.4	3.2	4.0	3.7	3.5	3.3	1.0	2.3	–0.8	–1.9
Wyoming	3.5	3.9	4.6	5.5	3.6	4.3	4.4	1.4	1.8	–4.1	3.4
Colorado	3.9	4.2	3.8	4.6	4.2	3.6	3.5	–0.1	1.9	–0.9	–3.0
New Mexico	2.7	2.2	2.9	3.5	3.1	2.9	2.9	0.4	1.9	–1.2	–1.1
Arizona	3.4	4.0	3.0	4.1	3.6	3.2	3.1	–0.6	3.2	–1.3	–2.5
Utah	3.2	2.9	2.8	3.6	3.1	2.7	2.7	–0.7	2.5	–1.5	–2.3
Nevada	5.0	4.4	3.9	4.2	4.2	3.7	3.7	–1.2	0.7	0.0	–2.1

See footnotes at end of table.

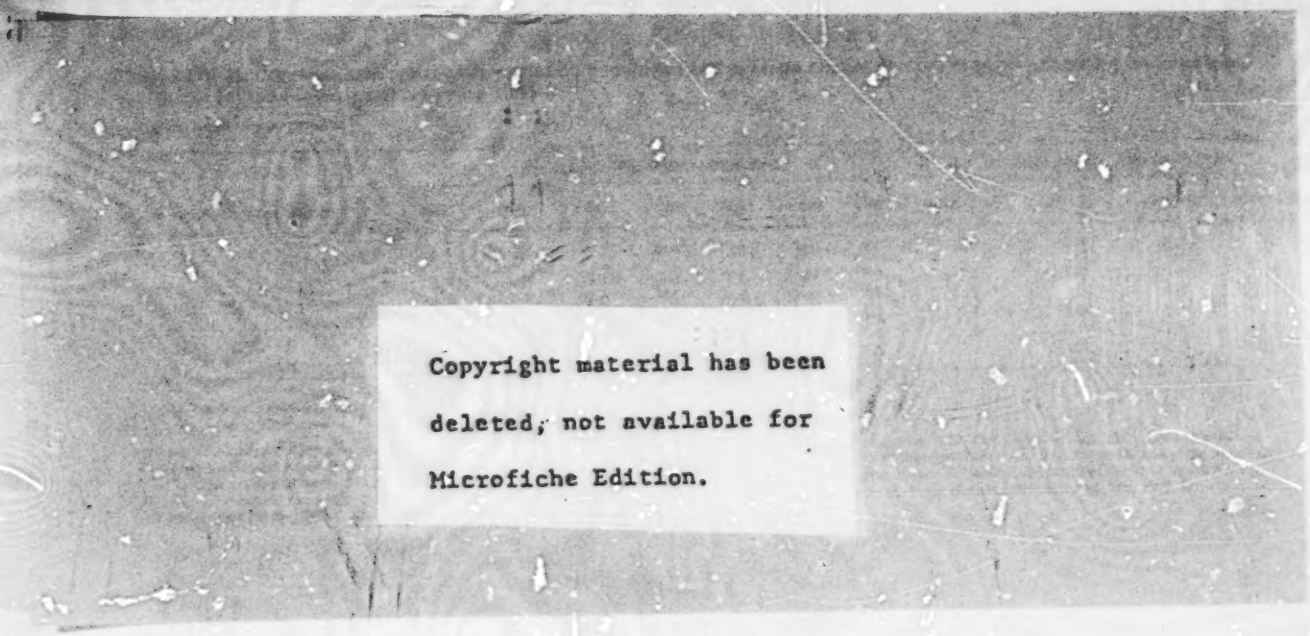

Copyright material has been
deleted; not available for
Microfiche Edition.

Table 93 (page 1 of 2). Occupancy rate in community hospitals and average annual percent change, according to geographic division and State: United States, selected years 1940–86

[Data are based on reporting by facilities]

Geographic division and State	Percent of beds occupied						Average annual percent change			
	1940[1]	1960[2]	1970	1980	1985	1986	1940–60[1,2]	1960–70[2]	1970–80	1980–86
United States	69.9	74.7	77.3	75.2	65.1	64.5	0.3	0.3	–0.3	–2.5
New England	72.5	75.2	79.7	80.1	72.8	69.7	0.2	0.6	0.1	–2.3
Maine	72.4	73.2	73.0	74.5	66.6	67.0	0.1	–0.0	0.2	–1.8
New Hampshire	65.3	66.5	73.4	73.2	63.4	65.0	0.1	1.0	–0.0	–2.0
Vermont	68.8	68.5	76.3	73.7	68.0	67.6	–0.0	1.1	–0.3	–1.4
Massachusetts	71.8	75.8	80.3	81.7	74.1	68.8	0.3	0.6	0.2	–2.8
Rhode Island	77.7	75.7	82.9	85.9	76.2	75.0	–0.1	0.9	0.4	–2.2
Connecticut	75.9	78.2	82.6	80.4	75.4	73.4	0.1	0.5	–0.3	–1.5
Middle Atlantic	75.5	78.1	82.4	83.2	77.1	76.8	0.2	0.5	0.1	–1.3
New York	78.9	79.4	82.9	85.9	83.9	82.1	0.0	0.4	0.4	–0.8
New Jersey	72.4	78.4	82.5	82.6	74.8	74.9	0.4	0.5	0.0	–1.7
Pennsylvania	71.3	76.0	81.5	79.5	68.7	70.2	0.3	0.7	–0.2	–2.1
East North Central	71.0	78.4	79.5	76.9	64.2	62.9	0.5	0.1	–0.3	–3.3
Ohio	72.1	81.3	81.8	79.2	63.9	63.8	0.6	0.1	–0.3	–3.5
Indiana	68.5	79.6	80.3	77.6	61.6	57.8	0.8	0.1	–0.3	–4.8
Illinois	73.1	76.0	79.3	74.9	64.4	64.1	0.2	0.4	–0.6	–2.6
Michigan	71.5	80.5	80.6	78.2	67.4	64.3	0.6	0.0	–0.3	–3.2
Wisconsin	65.2	73.9	73.2	73.6	61.8	61.1	0.6	–0.1	0.1	–3.1
West North Central	65.7	71.8	73.6	71.2	60.3	60.0	0.4	0.2	–0.3	–2.8
Minnesota	71.0	72.3	73.9	73.7	63.8	63.4	0.1	0.2	–0.0	–2.5
Iowa	63.6	72.6	71.9	68.7	57.3	58.1	0.7	–0.1	–0.5	–2.8
Missouri	68.6	75.8	79.3	75.1	63.0	62.9	0.5	0.5	–0.5	–2.9
North Dakota	61.9	71.3	67.1	68.6	61.1	61.2	0.7	–0.6	0.2	–1.9
South Dakota	59.1	66.0	66.3	60.6	57.5	56.6	0.6	0.0	–0.9	–1.1
Nebraska	59.0	65.6	69.9	67.4	58.4	56.6	0.5	0.6	–0.4	–2.9
Kansas	60.4	69.1	71.4	66.8	54.3	54.2	0.7	0.3	–0.4	–3.9
South Atlantic	66.7	74.8	77.9	75.5	65.5	65.7	0.6	0.4	–0.3	–2.3
Delaware	59.2	70.2	76.8	81.8	68.0	69.1	0.9	1.2	0.4	–2.8
Maryland	74.6	73.9	79.3	84.0	73.5	73.3	–0.0	0.7	0.6	–2.2
District of Columbia	76.2	80.8	77.7	83.0	75.9	76.6	0.3	–0.4	0.7	–1.3
Virginia	70.0	78.0	81.1	77.8	67.2	67.6	0.5	0.4	–0.4	–2.3
West Virginia	62.	74.5	79.3	75.6	60.7	60.2	0.9	0.6	–0.5	–3.7
North Carolina	64.8	73.9	78.5	77.8	64.9	67.1	0.7	0.6	–0.1	–2.4
South Carolina	60.1	76.9	76.4	77.0	67.7	69.3	0.5	–0.1	0.1	–1.7
Georgia	62.7	71.7	76.5	70.4	64.4	63.9	0.7	0.7	–0.8	–1.6
Florida	57.5	73.9	76.2	71.7	62.5	62.1	1.3	0.3	–0.6	–2.4
East South Central	62.6	71.8	78.2	74.6	62.7	61.8	0.7	0.9	–0.5	–3.1
Kentucky	61.6	73.4	79.6	77.4	64.0	63.3	0.9	0.8	–0.3	–3.3
Tennessee	65.5	75.9	78.2	75.9	64.6	63.2	0.7	0.3	–0.3	–3.0
Alabama	59.0	70.8	80.0	73.3	62.3	61.5	0.9	1.2	–0.9	–2.9
Mississippi	63.8	62.8	73.6	70.5	58.1	57.7	–0.1	1.6	–0.4	–3.3
West South Central	62.5	68.7	73.2	69.7	56.9	56.3	0.5	0.6	–0.5	–3.5
Arkansas	55.6	70.0	74.4	69.6	58.0	56.9	1.2	0.6	–0.7	–3.3
Louisiana	75.0	67.9	73.6	69.7	58.6	58.1	–0.5	0.8	–0.5	–3.0
Oklahoma	54.5	71.0	72.5	68.1	58.2	56.3	1.3	0.2	–0.6	–3.1
Texas	59.6	68.2	73.0	70.1	56.6	55.7	0.7	0.7	–0.4	–3.8
Mountain	60.9	69.9	71.2	69.6	58.6	58.3	0.7	0.2	–0.2	–2.9
Montana	62.8	60.3	65.9	66.1	59.1	58.8	–0.2	0.9	0.0	–1.9
Idaho	65.4	55.9	66.1	65.2	56.6	58.9	–0.8	1.7	–0.1	–2.2
Wyoming	47.5	61.1	63.1	57.2	52.0	50.7	1.3	0.3	–1.0	–2.0
Colorado	62.1	80.6	74.0	71.6	59.0	59.3	1.3	–0.9	–0.3	–3.1
New Mexico	47.8	65.1	69.8	66.2	60.0	59.5	1.6	0.7	–0.5	–1.8
Arizona	61.2	74.2	73.3	74.2	61.5	62.6	1.0	–0.1	0.1	–2.6
Utah	65.8	70.0	73.7	70.0	58.7	58.0	0.3	0.5	–0.5	–3.1
Nevada	67.9	70.7	72.7	68.8	52.6	47.1	0.2	0.3	–0.5	–6.1

See footnotes at end of table.

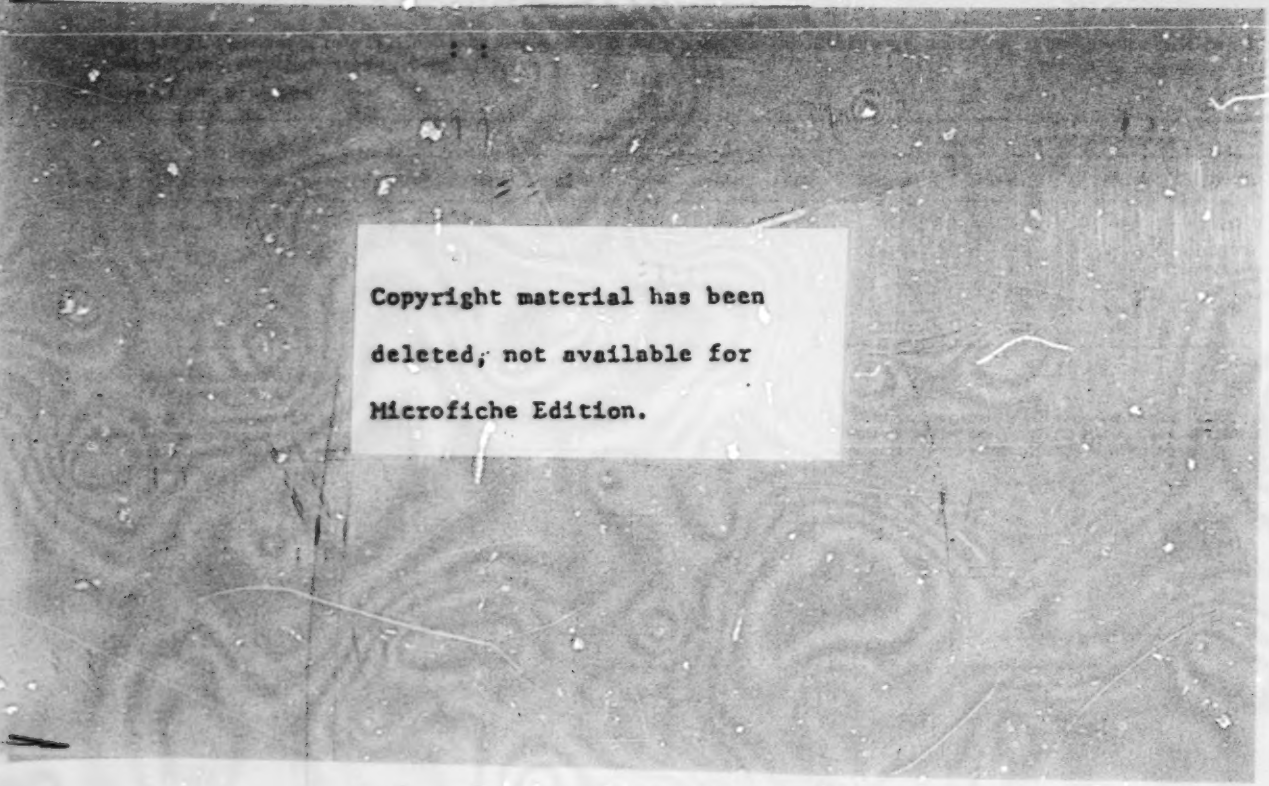

Copyright material has been
deleted, not available for
Microfiche Edition.

Table 94 (page 1 of 2). Full-time equivalent employees per 100 average daily patients in community hospitals and average annual percent change, according to geographic division and State: United States, selected years 1960–86

[Data are based on reporting by facilities]

Geographic division and State	Employees per 100 average daily patients					Average annual percent change		
	1960[1]	1970	1980	1985	1986	1960–70[1]	1970–80	1980–86
United States	226	302	394	472	492	2.9	2.7	3.8
New England	249	351	456	532	563	3.5	2.7	3.6
Maine	227	289	409	494	504	2.4	3.5	3.5
New Hampshire	240	310	400	517	519	2.6	2.6	4.4
Vermont	227	318	348	434	436	3.4	0.9	3.8
Massachusetts	252	365	488	547	593	3.8	2.9	3.3
Rhode Island	270	383	454	547	566	3.6	1.7	3.7
Connecticut	247	347	440	529	553	3.5	2.4	3.9
Middle Atlantic	225	311	383	450	465	3.3	2.1	3.3
New York	233	336	396	436	457	3.7	1.7	2.4
New Jersey	225	278	332	423	423	2.1	1.8	4.1
Pennsylvania	214	287	390	491	503	3.0	3.1	4.3
East North Central	226	299	396	494	521	2.8	2.8	4.7
Ohio	232	302	392	526	543	2.7	2.6	5.6
Indiana	216	280	374	482	525	2.6	2.9	5.8
Illinois	226	301	407	492	510	2.9	3.1	3.8
Michigan	239	313	417	513	554	2.7	2.9	4.8
Wisconsin	199	277	367	405	430	3.4	2.9	2.7
West North Central	212	273	357	422	438	2.6	2.7	3.5
Minnesota	220	273	347	384	395	2.2	2.4	2.2
Iowa	208	258	349	427	441	2.2	3.1	4.0
Missouri	217	289	385	471	506	2.9	2.9	4.7
North Dakota	177	254	295	326	335	3.7	1.5	2.1
South Dakota	188	247	352	323	339	2.8	3.6	–0.6
Nebraska	220	276	326	397	408	2.3	1.7	3.8
Kansas	210	270	368	478	463	2.5	3.1	3.9
South Atlantic	217	295	379	458	478	3.1	2.5	3.9
Delaware	243	328	405	526	556	3.0	2.1	5.4
Maryland	237	354	403	473	508	4.1	1.3	3.9
District of Columbia	240	363	483	509	572	4.2	2.9	2.9
Virginia	193	269	369	435	461	4.1	2.5	3.8
West Virginia	198	255	351	452	462	2.6	3.2	4.7
North Carolina	196	277	363	464	507	3.5	2.7	5.7
South Carolina	185	257	356	426	444	3.3	3.3	3.8
Georgia	233	294	398	458	470	2.4	3.0	2.9
Florida	245	296	375	450	462	1.9	2.4	3.5
East South Central	227	275	348	409	420	1.9	2.4	3.2
Kentucky	229	276	332	403	409	1.9	1.9	3.5
Tennessee	231	284	359	420	437	2.1	2.4	3.3
Alabama	233	286	357	410	425	1.3	3.0	2.9
Mississippi	207	270	334	392	394	2.7	2.1	2.8
West South Central	225	297	384	471	498	2.8	2.6	4.4
Arkansas	209	274	355	429	440	2.7	2.6	3.6
Louisiana	218	292	392	483	493	3.0	3.0	3.9
Oklahoma	218	296	404	480	496	3.1	3.2	3.5
Texas	232	304	383	473	510	2.7	2.3	4.9
Mountain	226	299	413	486	508	2.8	3.3	3.5
Montana	216	247	302	351	350	1.4	2.0	2.5
Idaho	255	281	374	427	444	1.0	2.9	2.9
Wyoming	217	251	445	417	423	1.5	5.9	–0.8
Colorado	221	306	398	481	517	3.3	2.7	4.5
New Mexico	228	314	430	536	531	3.3	3.2	3.6
Arizona	222	327	455	523	547	3.9	3.4	3.1
Utah	243	304	460	579	604	2.3	4.2	4.6
Nevada	224	284	427	490	530	2.4	4.2	3.7

See footnotes at end of table.

Copyright material has been deleted; not available for Microfiche Edition.

Table 95 (page 1 of 2). Nursing homes with 25 or more beds, beds, and bed rates, according to geographic division and State: United States, 1976, 1982, and 1986

[Data are based on reporting by facilities]

Geographic division and State	Nursing homes			Beds			Bed rate[1]		
	1976	1982	1986	1976	1982	1986	1976	1982	1986
United States	14,133	14,585	16,033	1,291,632	1,469,357	1,615,771	56.3	54.8	55.4
New England	1,211	1,246	1,235	91,885	105,293	108,474	66.0	66.3	63.9
Maine	121	155	144	7,027	9,717	9,685	54.9	66.6	62.1
New Hampshire	68	70	75	5,633	6,729	6,987	61.9	61.7	58.7
Vermont	53	51	47	3,477	3,198	3,083	65.6	53.3	48.2
Massachusetts	645	620	612	47,169	50,386	51,126	69.5	67.1	64.4
Rhode Island	85	95	101	6,786	8,885	9,927	58.3	67.3	69.9
Connecticut	239	255	256	21,813	26,400	27,666	65.9	68.2	65.4
Middle Atlantic	1,567	1,587	1,921	187,435	210,010	243,962	44.1	44.6	48.6
New York	708	732	777	97,489	108,898	114,192	47.3	49.5	50.0
New Jersey	313	332	356	31,147	36,638	39,071	39.5	40.6	39.8
Pennsylvania	546	523	788	58,799	64,474	90,699	41.9	40.2	52.2
East North Central	2,904	2,966	2,999	281,144	326,171	330,342	68.2	69.4	65.7
Ohio	750	830	886	60,680	74,276	82,522	55.7	60.6	62.5
Indiana	420	449	449	35,789	47,196	47,257	65.9	77.1	71.9
Illinois	805	809	775	84,085	99,777	96,684	71.6	76.2	69.8
Michigan	508	471	480	53,966	55,349	53,651	64.7	57.8	51.6
Wisconsin	421	407	409	46,614	49,573	50,228	89.0	84.0	80.5
West North Central	1,965	2,171	2,142	157,057	185,774	187,781	75.7	81.9	79.3
Minnesota	385	390	399	38,177	42,500	44,357	85.4	85.0	84.3
Iowa	440	475	440	31,785	38,150	34,942	86.1	95.6	84.4
Missouri	408	530	552	32,539	48,403	50,204	53.3	69.7	72.3
North Dakota	82	80	81	6,413	6,402	6,789	85.5	76.2	77.1
South Dakota	117	116	114	8,047	7,938	7,918	93.6	84.4	80.0
Nebraska	210	225	214	18,408	18,516	18,132	93.4	87.8	83.6
Kansas	323	355	342	21,688	25,865	25,439	75.0	82.1	77.1
South Atlantic	1,475	1,745	2,152	142,245	177,495	212,382	38.4	38.0	40.4
Delaware	22	27	36	2,123	2,194	3,345	40.8	34.8	46.5
Maryland	165	179	200	18,589	21,164	24,402	53.0	50.2	51.6
District of Columbia	17	16	19	2,604	2,556	3,029	36.7	34.5	39.3
Virginia	208	267	288	23,816	29,251	29,653	54.1	54.4	48.9
West Virginia	73	95	103	4,858	7,505	8,692	22.6	30.4	33.3
North Carolina	276	346	402	20,903	28,156	34,049	40.8	43.5	46.6
South Carolina	102	130	157	8,311	11,560	14,071	34.8	37.3	39.6
Georgia	304	306	256	28,732	32,194	31,738	64.9	58.6	52.2
Florida	308	379	649	32,339	42,915	63,403	23.3	23.6	30.6
East South Central	856	885	867	66,994	85,565	90,180	45.5	49.6	48.8
Kentucky	267	276	277	19,929	25,837	26,426	53.3	60.8	58.9
Tennessee	258	251	267	19,448	26,111	28,599	42.9	48.1	48.5
Alabama	209	190	203	19,207	20,490	21,736	49.6	44.5	43.8
Mississippi	122	148	140	8,410	13,127	13,419	32.5	43.9	42.7
West South Central	1,740	1,789	1,922	157,173	177,237	192,629	72.6	68.9	69.0
Arkansas	208	200	237	19,322	19,327	21,910	69.5	59.8	63.7
Louisiana	200	224	276	18,969	24,836	32,747	53.4	59.3	72.1
Oklahoma	341	359	382	25,990	28,902	30,359	76.2	74.5	73.9
Texas	991	1,006	1,027	92,892	104,172	104,904	77.9	72.3	66.3
Mountain	495	529	631	41,881	47,857	57,414	47.4	41.4	43.1
Montana	69	59	57	4,725	5,120	4,804	61.4	56.9	48.5
Idaho	54	47	60	4,263	4,102	5,240	52.6	40.6	46.8
Wyoming	22	25	27	1,753	2,060	2,301	51.8	52.8	53.5
Colorado	174	157	183	17,792	16,848	18,402	81.6	64.1	62.6
New Mexico	30	31	56	2,489	2,351	4,915	26.5	18.7	34.1
Arizona	67	109	134	5,832	9,888	12,740	24.6	28.9	31.1
Utah	63	78	84	3,707	5,025	5,995	39.0	42.2	45.1
Nevada	16	25	30	1,320	2,463	3,017	28.1	32.0	30.5

See footnotes at end of table.

Table 95 (page 2 of 2). Nursing homes with 25 or more beds, beds, and bed rates, according to geographic division and State: United States, 1976, 1982, and 1986

[Data are based on reporting by facilities]

Geographic division and State	Nursing homes			Beds			Bed rate[1]		
	1976	1982	1986	1976	1982	1986	1976	1982	1986
Pacific	1,920	1,667	2,144	165,818	153,955	195,316	58.5	44.8	50.7
Washington	318	309	328	29,415	30,017	32,021	78.4	65.0	61.6
Oregon	202	177	214	15,758	15,711	17,404	59.0	48.5	48.1
California	1,369	1,148	1,589	118,144	105,325	143,179	55.7	41.2	50.3
Alaska	8	10	10	736	1,031	1,082	82.0	79.3	60.1
Hawaii	23	23	23	1,763	1,871	1,630	29.4	22.0	15.8

[1]Number of beds per 1,000 resident population 65 years of age and over.

NOTE: The 1982 inventory excluded certain types of nursing homes that the 1976 and 1986 inventories included (nursing home units of hospitals, nursing homes for the blind, etc.). To make the data comparable, these types of homes and their beds were subtracted from the 1976 and 1986 figures.

SOURCES: Division of Health Care Statistics, National Center for Health Statistics: Trends in nursing and related care homes and hospitals, United States, selected years 1969–80, by G. W. Strahan. *Vital and Health Statistics*. Series 14, No. 30. DHHS Pub. No. (PHS) 84–1825. Public Health Service. Washington. U.S. Government Printing Office, Mar. 1984; Nursing and related care homes as reported from the 1982 National Master Facility Inventory Survey, by D. A. Roper. *Vital and Health Statistics*. Series 14, No. 32. DHHS Pub. No. (PHS) 86–1827. Public Health Service.Washington. U.S. Government Printing Office, Sept. 1986; data from the National Master Facility Inventory; Final data from the 1986 Inventory of Long-term Care Places; U.S. Bureau of the Census, State population and household estimates to 1985, with age and components of change. *Current Population Reports*. Series P-25, No. 998. Washington. U.S. Government Printing Office, 1986; U.S. Bureau of the Census, State population and household estimates with age, sex, and components of change 1981–1986. *Current Population Reports*. Series P-25, No. 1010. Washington. U.S. Government Printing Office, 1987.

Table 98. Gross national product and national health expenditures: United States, selected years 1929–96

[Data are compiled by the Health Care Financing Administration]

Year	Gross national product in billions	National health expenditures		
		Amount in billions	Percent of gross national product	Amount per capita
1929	$ 103.9	$ 3.6	3.5	$ 29
1935	72.8	2.9	4.0	23
1940	100.4	4.0	4.0	29
1950	288.3	12.7	4.4	80
1955	405.9	17.7	4.4	101
1960	515.3	26.9	5.2	142
1965	705.1	41.9	5.9	205
1966	772.0	46.3	6.0	224
1967	816.4	51.5	6.3	247
1968	892.6	58.2	6.5	276
1969	963.9	65.6	6.8	309
1970	1,015.5	75.0	7.4	349
1971	1,102.7	83.5	7.6	384
1972	1,212.8	94.0	7.7	428
1973	1,359.3	103.4	7.6	467
1974	1,472.8	116.1	7.9	521
1975	1,598.4	132.7	8.3	590
1976	1,782.8	150.8	8.5	665
1977	1,990.5	169.9	8.5	743
1978	2,249.7	189.7	8.4	822
1979	2,508.2	214.7	8.6	921
1980	2,731.9	248.1	9.1	1,054
1981	3,052.6	287.0	9.4	1,207
1982	3,166.0	323.6	10.2	1,348
1983	3,405.7	357.2	10.5	1,473
1984	3,765.0	391.1	10.4	1,597
1985	3,998.1	422.6	10.6	1,710
1986	4,208.1	458.2	10.9	1,837

NOTE: These data reflect Bureau of Economic Analysis, Department of Commerce, revisions to the gross national product as of December 1988 and Social Security Administration revisions to the population as of April 1988.

SOURCE: Division of National Cost Estimates, Office of the Actuary: National health expenditures, 1986–2000. *Health Care Financing Review*. Vol. 8, No. 4. HCFA Pub. No. 03239. Health Care Financing Administration. Washington. U.S. Government Printing Office, Aug. 1987.

Table 97. Total health expenditures as a percentage of gross domestic product: Selected countries, selected years 1960–86

Country	1960	1965	1970	1975	1980	1983	1984	1985	1986
Australia	4.8	4.9	5.0	5.7	6.6	6.9	6.9	6.8	6.8
Austria	4.6	5.0	5.4	7.3	7.9	7.9	8.0	8.2	8.0
Belgium	3.4	3.9	4.0	5.8	6.6	7.2	7.2	7.2	7.1
Canada	5.5	6.1	7.2	7.3	7.4	8.6	8.5	8.4	8.5
Denmark	3.6	4.8	6.1	6.5	6.8	6.6	6.3	6.1	6.1
Finland	4.2	4.9	5.6	6.2	6.3	6.6	6.8	7.3	7.5
France	4.2	5.2	5.6	6.7	7.4	8.1	8.4	8.4	8.5
Germany	4.7	5.1	5.5	7.8	7.9	8.0	8.1	8.2	8.1
Greece	2.9	3.1	4.0	4.0	4.2	4.2	4.0	4.2	3.9
Iceland	5.9	6.0	8.7	---	6.9	8.2	7.3	7.8	7.5
Ireland	4.0	4.4	5.6	7.7	8.5	8.0	8.0	8.0	7.9
Italy	3.3	4.0	4.8	5.8	6.8	6.7	6.6	6.7	6.7
Japan	3.0	4.5	4.8	5.6	6.6	6.9	6.7	6.6	6.7
Netherlands	3.9	4.4	6.0	7.7	8.2	8.6	8.3	8.3	8.3
New Zealand	4.4	4.5	5.1	6.4	7.2	6.3	---	---	6.9
Norway	3.3	3.9	5.0	6.7	6.6	6.8	6.5	6.4	6.8
Portugal	---	---	---	6.4	5.9	5.4	5.6	5.6	5.6
Spain	2.3	2.7	4.1	5.1	5.9	6.3	6.0	6.0	6.0
Sweden	4.7	5.6	7.2	8.0	9.5	9.6	9.5	9.4	9.1
Switzerland	3.3	3.8	5.2	7.1	7.2	7.8	7.7	7.9	8.0
United Kingdom	3.9	4.1	4.5	5.5	5.8	6.2	6.2	6.1	6.2
United States	5.2	6.0	7.4	8.4	9.2	10.7	10.5	10.7	11.1

NOTES: Gross domestic product differs slightly from gross national product shown in the previous table. For definitions, see Appendix II.

SOURCES: Organization for Economic Cooperation and Development: *Measuring Health Care 1960–1983*, OECD Pub. No. 43239. Paris, France, 1985; G. Schieber and J. Poullier: International health care expenditure and utilization trends: An update. *Health Affairs*. Vol. 7, No. 4, fall 1988.

Table 98. National health expenditures and percent distribution, according to type of expenditure: United States, selected years 1950–86

[Data are compiled by the Health Care Financing Administration]

Type of expenditure	1950	1960	1965	1970	1975	1980	1984	1985	1986
	Amount in billions								
Total	$ 12.7	$ 26.9	$ 41.9	$ 75.0	$132.7	$248.1	$391.1	$422.6	$458.2
	Percent distribution								
All expenditures	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Health services and supplies	92.4	93.6	91.6	92.8	93.7	95.2	96.0	96.3	96.5
Personal health care	88.0	88.0	85.5	87.1	88.3	88.6	87.4	87.9	88.2
Hospital care	30.4	33.8	33.3	37.3	39.5	41.0	40.0	39.6	39.2
Physician services	21.7	21.1	20.2	19.1	18.8	18.9	19.3	19.6	20.1
Dentist services	7.6	7.4	6.7	6.3	6.2	6.2	6.3	6.4	6.5
Nursing home care	1.5	2.0	4.9	6.3	7.6	8.2	8.1	8.3	8.3
Other professional services	3.1	3.2	2.5	2.1	2.0	2.3	2.8	2.9	3.1
Drugs and medical sundries	13.6	13.6	12.4	10.7	9.0	7.6	6.8	6.8	6.7
Eyeglasses and appliances	3.9	2.9	2.8	2.6	2.4	2.0	1.8	1.8	1.8
Other health services	4.2	4.0	2.7	2.8	2.8	2.4	2.4	2.6	2.6
Program administration and net cost of health insurance	3.6	4.1	4.2	3.8	3.0	3.7	5.8	5.6	5.4
Government public health activities	2.9	1.5	1.9	1.9	2.4	2.9	2.8	2.9	2.9
Research and construction	7.6	6.4	8.4	7.2	6.3	4.8	4.0	3.7	3.5
Noncommercial research	0.9	2.5	3.6	2.6	2.5	2.2	1.7	1.7	1.8
Construction	6.7	3.9	4.8	4.6	3.8	2.6	2.3	1.9	1.8

SOURCE: Division of National Cost Estimates, Office of the Actuary: National health expenditures, 1986–2000. *Health Care Financing Review*. Vol. 8, No. 4. HCFA Pub. No. 03238. Health Care Financing Administration. Washington. U.S. Government Printing Office, Aug. 1987.

Table 99. National health expenditures average annual percent change, according to type of expenditure: United States, selected years 1950–86

[Data are compiled by the Health Care Financing Administration]

Type of expenditure	1950–60	1960–65	1965–70	1970–75	1975–80	1980–85	1984–85	1985–86
	Average annual percent change							
All expenditures	7.8	9.3	12.3	12.1	13.3	11.2	8.1	8.4
Health services and supplies	8.0	8.8	12.6	12.3	13.7	11.5	8.4	8.5
Personal health care	8.1	8.7	12.8	12.4	13.4	11.1	8.6	8.8
Hospital care	9.0	9.0	14.9	13.4	14.2	10.5	7.0	7.4
Physician services	7.5	8.3	11.1	11.7	13.4	12.1	9.8	11.1
Dentist services	7.5	7.3	11.1	11.6	13.3	12.0	9.9	9.5
Nursing home care	10.9	31.5	17.8	16.4	15.2	11.4	10.1	9.1
Other professional services	8.1	3.7	9.1	10.4	16.8	16.7	13.5	13.8
Drugs and medical sundries	7.8	7.2	9.1	8.3	9.4	8.7	8.1	6.5
Eyeglasses and appliances	4.7	8.6	10.7	10.1	9.9	7.7	7.0	9.8
Other health services	7.7	0.7	12.5	12.8	9.5	12.9	14.2	10.2
Program administration and net cost of health insurance	9.1	9.8	10.1	7.2	18.1	20.7	4.7	3.8
Government public health activities	1.4	14.5	11.9	17.2	18.2	11.0	11.4	9.2
Research and construction	5.9	15.5	9.0	9.2	7.3	5.3	–1.2	5.3
Noncommercial research	18.9	18.0	5.4	11.1	10.3	6.5	8.9	11.4
Construction	2.2	13.8	11.4	8.1	5.1	4.5	–9.0	–0.2

SOURCE: Division of National Cost Estimates, Office of the Actuary: National health expenditures, 1986–2000. *Health Care Financing Review.* Vol. 8, No. 4. HCFA Pub. No. 03239. Health Care Financing Administration. Washington. U.S. Government Printing Office, Aug. 1987.

Table 100. Personal health care expenditures average annual percent change and percent distribution of factors affecting growth: United States, 1965–88

[Data are compiled by the Health Care Financing Administration]

Period	Average annual percent change	Factors affecting growth[1]			
		All factors	Prices	Population	Intensity[2]
		Percent distribution			
1965–66	11.4	100	62	8	30
1966–67	10.6	100	46	11	43
1967–68	12.2	100	55	9	36
1968–69	13.1	100	45	8	47
1969–70	13.4	100	42	8	50
1970–71	14.5	100	48	8	44
1971–72	10.4	100	67	11	22
1972–73	11.6	100	39	9	52
1973–74	10.5	100	46	8	45
1974–75	13.8	100	68	6	26
1975–76	15.7	100	69	6	26
1976–77	13.4	100	62	7	32
1977–78	12.3	100	64	7	29
1978–79	12.2	100	64	8	28
1979–80	13.3	100	67	8	25
1980–81	15.8	100	73	7	21
1981–82	15.9	100	67	7	26
1982–83	12.5	100	69	9	23
1983–84	9.8	100	66	10	23
1984–85	8.6	100	69	11	20
1985–86	8.6	100	58	11	31
1986–88	8.8	100	54	11	35

[1]Revised for 1985–88 because of a new hospital input price index for deflating hospital costs.
[2]Represents changes in use and/or kinds of services and supplies.

SOURCE: Division of National Cost Estimates, Office of the Actuary: National health expenditures, 1986–2000. *Health Care Financing Review*. Vol. 8, No. 4. HCFA Pub. No. 03239. Health Care Financing Administration. Washington. U.S. Government Printing Office, Aug. 1987.

Table 101. Consumer Price Index and average annual percent change for all items and selected items: United States, selected years 1950–87

[Data are based on reporting by samples of providers and other retail outlets]

Year	All items	Medical care	Food	Apparel and upkeep	Housing	Energy	Personal care
				Consumer Price Index			
1950	72.1	53.7	74.5	79.0	72.8	---	68.3
1955	80.2	64.8	81.6	84.1	82.3	---	77.9
1960	88.7	79.1	88.0	89.6	90.2	94.2	90.1
1965	94.5	89.5	94.4	93.7	94.9	96.3	95.2
1970	116.3	120.6	114.9	116.1	118.2	107.0	113.2
1975	161.2	168.6	175.4	142.3	164.5	176.6	150.7
1976	170.5	184.7	180.8	147.6	174.6	189.3	160.5
1977	181.5	202.4	192.2	154.2	186.5	207.3	170.9
1978	195.4	219.4	211.4	159.6	202.8	220.4	182.0
1979	217.4	239.7	234.5	166.6	227.6	275.9	195.8
1980	246.8	265.9	254.6	178.4	263.3	361.1	213.1
1981	272.4	294.5	274.6	186.9	293.5	410.0	232.0
1982	289.1	328.7	285.7	191.8	314.7	416.1	248.3
1983	298.4	357.3	291.7	196.5	323.1	419.3	261.1
1984	311.1	379.5	302.9	200.2	336.5	423.6	271.4
1985	322.2	403.1	309.8	206.0	349.9	426.5	281.9
1986	328.4	433.5	319.7	207.8	360.2	370.3	291.3
1987	340.4	462.2	333.0	216.9	371.0	371.7	299.6
				Average annual percent change			
1950–55	2.2	3.8	1.8	1.3	2.5	---	2.7
1955–60	2.0	4.1	1.5	1.3	1.9	---	3.0
1960–65	1.3	2.5	1.4	0.9	1.0	0.4	1.1
1965–70	4.2	3.1	4.0	4.4	4.5	2.1	3.5
1970–75	6.7	6.9	8.8	4.2	6.8	10.5	5.9
1975–80	8.9	9.5	7.7	4.6	9.9	15.4	7.2
1975–76	5.8	9.5	3.1	3.7	6.1	7.2	6.5
1976–77	6.5	9.6	6.3	4.5	6.8	9.5	6.5
1977–78	7.7	8.4	10.0	3.5	8.7	6.3	6.5
1978–79	11.3	9.3	10.9	4.4	12.2	25.2	7.6
1979–80	13.5	10.9	8.6	7.1	15.7	30.9	8.8
1980–85	5.5	8.7	4.0	2.9	5.9	3.4	5.8
1980–81	10.4	10.8	7.9	4.8	11.5	13.5	8.9
1981–82	6.1	11.6	4.0	2.6	7.2	1.5	7.0
1982–83	3.2	8.7	2.1	2.5	2.7	0.8	5.2
1983–84	4.3	6.2	3.8	1.9	4.1	1.0	3.9
1984–85	3.6	6.2	2.3	2.9	4.0	0.7	3.9
1985–86	1.9	7.5	3.2	0.9	2.9	-13.2	3.3
1986–87	3.7	6.6	4.2	4.4	3.0	0.4	2.8

NOTE: 1987 = 100.

SOURCE: Bureau of Labor Statistics, U.S. Department of Labor: *Consumer Price Index.* Various releases.

Table 102. Consumer Price Index for all items and medical care components: United States, selected years 1950–87

[Data are based on reporting by samples of providers and other retail outlets]

Item and medical care component	1950	1960	1965	1970	1975	1980	1985	1986	1987
	Consumer Price Index								
CPI, all items	72.1	88.7	94.5	116.3	161.2	246.8	322.2	328.4	340.4
Less medical care	---	89.4	94.9	116.1	160.9	245.5	317.7	322.6	333.8
CPI, all services	58.7	83.5	92.2	121.6	166.6	270.3	381.5	400.5	417.1
All medical care	53.7	79.1	89.5	120.6	168.6	265.9	403.1	433.5	462.2
Medical care services	49.2	74.9	87.3	124.2	179.1	287.4	435.1	468.6	499.6
Professional medical services	---	---	---	119.7	164.5	252.0	367.3	390.9	416.8
Physicians' services	55.2	77.0	88.3	121.4	169.4	269.3	396.8	427.7	459.1
Dental services	63.9	82.1	92.2	119.4	161.9	240.2	347.9	367.3	392.1
Eye care[1]	---	---	---	---	---	---	---	---	103.5
Services by other medical professionals[1]	---	---	---	---	---	---	---	---	102.4
Hospital and related services[2]	---	---	---	---	---	133.5	224.0	237.4	253.9
Hospital rooms	30.3	57.3	75.9	145.4	236.1	418.9	710.5	753.1	807.5
Other inpatient services[1]	---	---	---	---	---	---	---	---	103.9
Outpatient services[1]	---	---	---	---	---	---	---	---	103.3
Medical care commodities	88.5	104.5	100.2	103.6	118.8	168.1	256.7	273.6	291.9
Prescription drugs	92.6	115.3	102.0	101.2	109.3	154.8	256.5	278.6	300.8
Nonprescription drugs and medical supplies[1]	---	---	---	---	---	---	---	---	103.1
Internal and respiratory over-the-counter drugs	---	---	98.0	106.2	130.1	188.1	281.7	295.5	311.1
Nonprescription medical equipment and supplies[2]	---	---	---	---	---	118.2	163.7	171.7	178.5

[1]Dec. 1986 = 100.
[2]Dec. 1977 = 100.

NOTE: 1967 = 100, except where noted.

SOURCE: Bureau of Labor Statistics, U.S. Department of Labor: *Consumer Price Index*. Various releases.

Table 103. Consumer Price Index average annual percent change for all items and medical care components: United States, selected years 1950–87

[Data are based on reporting by samples of providers and other retail outlets]

Item and medical care component	1950–60	1960–65	1965–70	1970–75	1975–80	1980–85	1985–86	1986–87
	Average annual percent change							
CPI, all items	2.1	1.3	4.2	6.7	8.9	5.5	1.9	3.7
Less medical care	---	1.2	4.1	6.7	8.8	5.3	1.5	3.5
CPI, all services	3.6	2.0	5.7	6.5	10.2	7.1	5.0	4.1
All medical care	4.0	2.5	6.1	6.9	9.6	8.7	7.5	6.6
Medical care services	4.3	3.1	7.3	7.6	10.0	8.6	7.7	6.6
Professional medical services	---	---	---	6.6	9.2	7.8	6.4	6.6
Physicians' services	3.4	2.8	6.6	6.9	10.1	8.2	7.2	7.3
Dental services	2.5	2.3	5.3	6.3	8.4	7.7	5.6	6.8
Eye care[1]	---	---	---	---	---	---	---	---
Services by other medical professionals[1]	---	---	---	---	---	---	---	---
Hospital and related services[2]	---	---	---	---	---	10.9	8.0	7.0
Hospital rooms	6.6	5.8	13.9	10.2	12.0	11.1	8.0	7.2
Other inpatient services[1]	---	---	---	---	---	---	---	---
Outpatient services[1]	---	---	---	---	---	---	---	---
Medical care commodities	1.7	–0.8	0.7	2.8	7.3	8.8	6.6	6.7
Prescription drugs	2.2	–2.4	–0.2	1.6	7.3	10.6	8.6	8.0
Nonprescription drugs and medical supplies[1]	---	---	---	---	---	---	---	---
Internal and respiratory over-the-counter drugs	---	---	1.6	4.1	7.7	8.4	4.9	5.3
Nonprescription medical equipment and supplies[2]	---	---	---	---	---	6.7	4.9	4.0

[1]Dec. 1986 = 100.
[2]Dec. 1977 = 100.

NOTE: 1967 = 100, except where noted.

SOURCE: Bureau of Labor Statistics, U.S. Department of Labor: *Consumer Price Index.* Various releases.

Copyright material has been deleted; not available for Microfiche Edition.

Table 155. National health expenditures and average annual percent change, according to source of funds: United States, selected years 1929–95

[Data are compiled by the Health Care Financing Administration]

Year	All health expenditures in billions	Private funds			Public funds		
		Amount in billions	Amount per capita[1]	Percent of total	Amount in billions	Amount per capita[1]	Percent of total
1929	$ 3.6	$ 3.2	$ 25	86.4	$ 0.5	$ 4	13.6
1935	2.9	2.4	18	80.8	0.6	4	19.2
1940	4.0	3.2	23	79.7	0.8	6	20.3
1950	12.7	9.2	58	72.8	3.4	21	27.2
1955	17.7	13.2	75	74.3	4.6	26	25.7
1960	26.9	20.3	107	75.3	6.6	35	24.7
1965	41.9	30.9	152	73.8	11.0	54	26.2
1966	46.3	32.7	158	70.7	13.6	66	29.3
1967	51.5	32.5	156	63.2	19.0	91	36.8
1968	58.2	36.1	171	62.0	22.1	105	38.0
1969	65.6	40.7	191	62.0	24.9	117	38.0
1970	75.0	47.2	220	63.0	27.8	129	37.0
1971	83.5	51.8	238	62.1	31.6	146	37.9
1972	94.0	58.5	267	62.3	35.4	161	37.7
1973	103.4	64.0	289	61.9	39.4	178	38.1
1974	116.1	69.1	310	59.5	47.0	211	40.5
1975	132.7	76.4	340	57.5	56.3	250	42.5
1976	150.8	88.0	388	58.4	62.8	277	41.6
1977	169.9	100.1	438	58.9	69.7	305	41.1
1978	189.7	110.1	477	58.0	79.6	345	42.0
1979	214.7	124.2	533	57.9	90.5	388	42.1
1980	248.1	142.9	607	57.6	105.2	447	42.4
1981	287.0	165.8	697	57.8	121.2	510	42.2
1982	323.6	188.4	784	58.2	135.3	563	41.8
1983	357.2	209.7	865	58.7	147.5	606	41.3
1984	391.0	231.3	945	59.2	159.7	652	40.8
1985	422.6	246.6	998	58.4	176.0	712	41.6
1986	458.2	268.5	1,076	58.6	189.7	760	41.4
				Average annual percent change			
1929–65	7.1	6.5	5.1	...	9.0	7.5	...
1965–86	12.1	9.5	9.8	...	13.2	13.4	...
1929–35	–3.6	–4.6	–5.3	...	2.2	0.0	...
1935–40	6.3	6.0	5.0	...	7.6	8.4	...
1940–50	12.2	11.2	9.7	...	15.5	13.3	...
1950–55	7.0	7.4	5.3	...	5.8	4.4	...
1955–60	8.7	9.0	7.4	...	7.8	6.1	...
1960–65	9.3	8.8	7.3	...	10.6	9.1	...
1965–70	12.3	8.8	7.7	...	20.4	19.0	...
1970–75	12.1	10.1	9.1	...	15.2	14.1	...
1975–80	13.3	13.4	12.3	...	13.3	12.3	...
1980–85	11.2	11.5	10.5	...	10.8	9.8	...
1980–81	15.7	16.0	14.8	...	15.2	14.1	...
1981–82	12.8	13.6	12.5	...	11.6	10.4	...
1982–83	10.4	11.3	10.3	...	9.1	8.0	...
1983–84	9.5	10.3	9.2	...	8.3	7.2	...
1984–85	8.1	6.6	5.6	...	10.2	9.2	...
1985–86	8.4	8.9	7.8	...	7.8	6.7	...

[1]Reflects May 1987 revisions to the Social Security area population estimates.

SOURCE: Division of National Cost Estimates, Office of the Actuary: National health expenditures, 1986–2000. *Health Care Financing Review*. Vol. 8, No. 4. HCFA Pub. No. 03239. Health Care Financing Administration. Washington. U.S. Government Printing Office, Aug. 1987.

Table 105. Personal health care expenditures and percent distribution, according to source of funds: United States, selected years 1929–86

[Data are compiled by the Health Care Financing Administration]

Year	Total in billions[1]	Per capita	All sources	Direct payment	Private health insurance	Philanthropy and industry	Government		
							Total	Federal	State and local
			Percent distribution						
1929	$ 3.2	$ 26	100.0	[2]89.4	(3)	2.6	9.0	2.7	6.3
1935	2.7	21	100.0	[2]82.4	(3)	2.8	14.7	3.4	11.3
1940	3.5	26	100.0	[2]81.3	(3)	2.6	16.1	4.1	12.0
1950	10.9	70	100.0	65.5	9.1	2.9	22.4	10.4	12.0
1955	15.7	93	100.0	58.1	16.1	2.8	23.0	10.5	12.5
1960	23.7	129	100.0	54.9	21.1	2.3	21.8	9.3	12.5
1965	35.9	176	100.0	51.8	24.2	2.2	22.0	10.1	11.9
1970	65.4	304	100.0	40.5	23.4	1.7	34.3	22.2	12.1
1971	72.2	332	100.0	38.9	23.8	1.8	35.5	23.2	12.3
1972	80.5	367	100.0	38.0	23.6	2.5	35.8	23.5	12.3
1973	89.0	402	100.0	37.4	24.0	2.5	36.1	23.7	12.4
1974	101.3	454	100.0	35.7	24.8	1.5	38.0	25.4	12.6
1975	117.1	521	100.0	32.5	28.7	1.3	39.5	26.8	12.7
1976	132.8	586	100.0	31.6	28.3	1.4	38.7	27.2	11.5
1977	149.1	652	100.0	31.1	28.8	1.3	38.7	27.4	11.3
1978	167.4	725	100.0	30.3	29.3	1.2	39.2	27.7	11.5
1979	189.7	814	100.0	29.4	30.0	1.2	39.3	28.1	11.2
1980	219.7	934	100.0	28.7	30.7	1.2	39.4	28.4	10.9
1981	254.7	1,071	100.0	28.5	30.8	1.3	39.5	29.1	10.3
1982	286.5	1,193	100.0	27.8	31.4	1.2	39.6	29.3	10.3
1983	314.7	1,298	100.0	28.2	31.1	1.3	39.4	29.5	9.9
1984	341.9	1,396	100.0	28.8	30.7	1.2	39.3	29.5	9.8
1985	371.3	1,502	100.0	28.4	30.4	1.2	40.0	30.3	9.6
1986	404.0	1,620	100.0	28.7	30.4	1.2	39.6	30.2	9.4

[1]Includes all expenditures for health services and supplies other than expenses for prepayment and administration and government public health activities.
[2]Excludes any insurance benefits and expenses for prepayment (insurance premiums less insurance benefits).
[3]Figures are not separable from direct payment.

SOURCE: Division of National Cost Estimates, Office of the Actuary: National health expenditures, 1986–2000. *Health Care Financing Review*. Vol. 8, No. 4. HCFA Pub. No. 03238. Health Care Financing Administration. Washington. U.S. Government Printing Office, Aug. 1987.

Table 107. Expenditures on hospital care, nursing home care, and physician services and percent distribution, according to source of funds: United States, selected years, 1965–86

Service and year	Total in billions	Direct payment	Private health insurance	Government		
				Total[1]	Medicaid	Medicare
		Percent distribution				
Hospital care						
1965	$ 14.0	16.8	41.1	39.9	...	...
1970	28.0	11.4	34.6	52.4	8.0	18.2
1975	52.4	7.9	35.9	55.1	9.1	21.9
1980	101.6	7.8	38.1	53.1	9.4	25.5
1983	146.8	9.0	37.4	52.3	8.8	27.6
1984	156.3	9.7	36.1	53.0	8.8	28.2
1985	167.2	8.7	36.2	54.0	8.9	29.2
1986	179.6	9.4	36.1	53.3	8.6	28.8
Nursing home care						
1965	2.1	64.5	0.1	34.3	...	...
1970	4.7	50.3	0.4	48.6	30.3	5.6
1975	10.1	42.7	0.7	56.0	47.9	2.9
1980	20.4	43.6	0.9	54.9	48.0	1.9
1983	29.4	48.0	0.9	50.4	44.4	1.8
1984	31.7	49.1	0.9	49.3	43.2	1.7
1985	35.0	49.9	0.9	48.5	42.4	1.7
1986	38.1	51.0	0.8	47.5	41.4	1.6
Physician services						
1965	8.5	61.6	31.4	6.9	...	...
1970	14.3	45.4	33.6	20.9	4.8	11.3
1975	24.9	34.1	39.5	26.3	7.5	13.5
1980	46.8	30.4	42.6	26.9	5.2	16.9
1983	68.4	28.3	43.2	28.4	4.3	19.6
1984	75.3	27.7	44.1	28.1	4.1	19.5
1985	82.6	27.8	42.9	29.3	4.3	20.5
1986	92.0	28.5	42.1	29.4	4.3	20.6

[1]Includes other government expenditures for these health care services, for example, care funded by the Veterans Administration and State and local expenditures on public health.

NOTE: Philanthropy and industry, which together accounted for 1.2 percent of personal health care expenditures in 1986, have been omitted from the sources of funds.

SOURCE: Division of National Cost Estimates, Office of the Actuary: National health expenditures, 1986-2000. *Health Care Financing Review*, Vol. 8, No. 4. HCFA Pub. No. 03239. Health Care Financing Administration. Washington. U.S. Government Printing Office, Aug. 1987.

Table 100. Nursing home average monthly charges per resident and percent of residents, according to primary source of payments and selected facility characteristics: United States, 1977 and 1985

[Data are based on a sample of nursing homes]

Facility characteristic	Own income or family support		Medicare		Medicaid		Public assistance welfare		All other sources	
	1977	1985	1977	1985	1977	1985	1977	1985	1977	1985
	Average monthly charge[1]									
All facilities	$550	$1,450	$1,167	$2,141	$720	$1,504	$508	$ 863	$440	$1,099
Ownership										
Proprietary	686	1,444	1,048	2,059	677	1,383	501	783	562	1,174
Nonprofit and government	699	1,462	1,325	*2,456	825	1,851	534	1,237	324	1,029
Certification										
Skilled nursing facility	806	1,797	1,136	2,315	955	2,000	575	*1,338	606	1,589
Skilled nursing and intermediate facility	800	1,643	1,195	2,156	739	1,509	623	1,215	630	1,702
Intermediate facility	567	1,222	...	...	563	1,150	479	900	*456	1,480
Not certified	447	809	...	...	...	...	401	664	*155	464
Bed size										
Less than 50 beds	516	866	*869	*1,348	663	1,335	394	*835	*295	*749
50–99 beds	666	1,388	*1,141	1,780	634	1,323	493	774	488	1,116
100–199 beds	721	1,567	1,242	2,192	691	1,413	573	855	551	1,504
200 beds or more	823	1,701	*1,179	2,767	925	1,919	602	1,071	370	*868
Geographic region										
Northeast	909	1,645	1,369	2,109	975	2,035	*511	738	395	1,244
Midwest	652	1,396	*1,160	2,745	639	1,382	537	1,241	524	1,416
South	585	1,359	*1,096	2,033	819	1,200	452	727	342	1,057
West	663	1,496	*868	1,836	663	1,501	564	837	*499	*843
	Percent of residents									
All facilities	36.4	41.8	2.0	1.4	47.8	50.4	6.4	3.4	5.3	3.2
Ownership										
Proprietary	37.5	40.1	1.7	1.6	49.6	52.1	7.3	3.9	3.8	2.3
Nonprofit and government	40.4	44.9	2.7	*0.9	43.8	46.6	4.4	2.3	8.6	5.3
Certification										
Skilled nursing facility	41.5	39.1	4.8	2.6	41.4	53.7	7.7	2.1	4.8	2.4
Skilled nursing and intermediate facility	31.8	36.6	2.6	1.9	58.3	57.8	3.2	1.3	4.1	2.2
Intermediate facility	36.3	41.4	...	...	55.3	55.9	5.3	*1.5	3.1	*1.1
Not certified	64.2	65.5	...	...	...	...	19.0	18.0	16.7	12.9
Bed size										
Less than 50 beds	49.6	53.1	*1.8	*1.2	32.7	33.8	10.5	11.2	5.4	*0.6
50–99 beds	39.5	48.5	*1.2	*1.3	46.5	42.9	8.1	3.9	4.7	2.5
100–199 beds	36.4	39.8	2.6	1.5	50.4	55.2	4.6	1.6	4.0	2.1
200 beds or more	28.6	30.1	2.3	*1.5	55.5	57.7	4.6	3.0	9.1	7.7
Geographic region										
Northeast	34.6	34.8	3.3	1.7	53.3	52.9	3.8	7.1	5.1	3.5
Midwest	44.5	49.1	1.5	*0.8	42.1	45.9	6.5	2.5	5.4	1.6
South	32.2	39.4	*1.4	*1.2	52.5	53.8	8.2	2.5	5.7	3.1
West	41.3	40.4	2.5	*2.7	44.7	49.2	8.7	*1.2	4.8	6.6

[1]Includes life-care residents and no-charge residents.

*Relative standard error greater than 30 percent.

SOURCES: National Center for Health Statistics: The National Nursing Home Survey, 1977 summary for the United States, by J. F. Van Nostrand, A. Zappolo, E. Hing, et al. *Vital and Health Statistics*. Series 13, No. 43. DHEW Pub. No. (PHS) 79-1794. Public Health Service. Washington. U.S. Government Printing Office, July 1979; and The National Nursing Home Survey: 1985 summary for the United States, by E. Hing, E. Sekscenski, and G. Strahan. *Vital and Health Statistics*. Series 13, No. 97. In press.

Table 109. Nursing home average monthly charges per resident and percent of residents, according to selected facility and resident characteristics: United States, 1964, 1973–74, 1977, and 1985

[Data are based on reporting by a sample of nursing homes]

Facility and resident characteristic	Average monthly charge[1]				Percent of residents			
	1964	1973–74[2]	1977	1985	1964	1973–74[2]	1977	1985
Facility								
All facilities	$186	$479	$689	$1,456	100.0	100.0	100.0	100.0
Ownership:								
Proprietary	205	489	670	1,379	60.2	69.8	68.2	68.7
Nonprofit and government	145	456	732	1,624	39.8	30.2	31.8	31.3
Certification:[3]								
Skilled nursing facility	...	566	880	1,905	...	39.8	20.7	18.5
Skilled nursing and intermediate facility	...	514	762	1,571	...	24.5	40.5	45.2
Intermediate facility	...	376	556	1,179	...	22.4	28.3	24.9
Not certified	...	329	390	875	...	13.3	10.6	11.4
Bed size:								
Less than 50 beds	---	397	546	1,036	---	15.2	12.9	8.9
50–99 beds	---	448	643	1,335	---	34.1	30.5	27.6
100–199 beds	---	502	706	1,478	---	35.6	38.8	43.2
200 beds or more	---	576	837	1,759	---	15.1	17.9	20.2
Geographic region:								
Northeast	213	651	918	1,781	28.6	22.0	22.4	23.6
Midwest	171	433	640	1,399	36.6	34.6	34.5	32.5
South	161	410	585	1,256	18.1	26.0	27.2	29.4
West	204	454	653	1,458	16.7	17.4	15.9	14.5
Resident								
All residents	186	479	689	1,456	100.0	100.0	100.0	100.0
Age:								
Under 65 years	155	434	585	1,379	12.0	10.6	13.6	11.6
65–74 years	184	473	669	1,372	18.9	15.0	16.2	14.2
75–84 years	191	488	710	1,468	41.7	35.5	35.7	34.1
85 years and over	194	485	719	1,497	27.5	38.8	34.5	40.0
Sex:								
Male	171	466	652	1,438	35.0	29.1	26.8	28.4
Female	194	484	705	1,463	65.0	70.9	71.2	71.6

[1]Includes life-care residents and no-charge residents.
[2]Data exclude residents of personal care homes.
[3]Medicare extended care facilities and Medicaid skilled nursing homes from the 1973–74 survey were considered to be equivalent to Medicare or Medicaid skilled nursing facilities in 1977 and 1985 for the purposes of this comparison.

SOURCES: National Center for Health Statistics: Charges for care and sources of payment for residents in nursing homes, United States, June–August 1969, by J. F. Van Nostrand and J. F. Sutton. *Vital and Health Statistics*. Series 12, No. 21. DHEW Pub. No. (HRA) 74–1708. Public Health Service. Washington. U.S. Government Printing Office, July 1973; Charges for care and sources of payment for residents in nursing homes, United States, National Nursing Home Survey, Aug. 1973–Apr. 1974, by E. Hing. *Vital and Health Statistics*. Series 13, No. 32. DHEW Pub. No. (PHS) 79–1783. Public Health Service. Washington. U.S. Government Printing Office. Nov. 1977; The National Nursing Home Survey: 1977 summary for the United States, by J. F. Van Nostrand, A. Zappolo, E. Hing, et al. *Vital and Health Statistics*. Series 13, No. 43. DHEW Pub. No. (PHS) 79–1794. Public Health Service. Washington. U.S. Government Printing Office, July 1979; and The National Nursing Home Survey: 1985 summary for the United States, by E. Hing, E. Sekscenski, and G. Strahan. *Vital and Health Statistics*. Series 13, No. 97. In press.

Table 110. National funding for health research and development and average annual percent change, according to source of funds: United States, selected years 1960–97

[Data are based on multiple sources]

Year and period	All funding	Source of funds			
		Federal	State and local	Industry[1]	Private nonprofit organizations
	Amount in millions				
1960	$ 886	$ 448	$ 46	$ 253	$139
1965	1,860	1,174	90	450	176
1970	2,847	1,667	170	795	215
1971	3,188	1,877	188	860	233
1972	3,538	2,147	228	934	227
1973	3,750	2,225	245	1,048	232
1974	4,443	2,764	254	1,183	252
1975	4,701	2,832	288	1,319	264
1976	5,107	3,059	312	1,469	267
1977	5,569	3,396	338	1,614	220
1978	6,262	3,811	415	1,800	236
1979	7,135	4,321	466	2,093	256
1980	7,999	4,723	501	2,496	279
1981	8,845	4,848	575	2,921	301
1982	9,450	4,970	652	3,504	324
1983	10,535	5,399	726	4,035	375
1984	11,899	6,087	800	4,525	487
1985	13,348	6,791	869	5,190	496
1986[2]	14,605	6,895	1,015	5,965	710
1987[3]	16,180	7,640	1,074	6,778	688
	Average annual percent change				
1960–65	11.4	11.1	12.6	12.9	6.5
1960–65	16.4	21.2	14.4	12.2	4.8
1965–70	8.9	7.3	13.6	12.1	4.1
1970–75	10.6	11.2	11.0	10.7	4.2
1970–75	11.3	12.6	16.5	8.2	8.4
1970–71	11.6	14.4	15.2	8.6	-2.6
1971–72	6.1	3.6	7.5	12.2	2.2
1972–73	18.5	23.8	3.7	12.9	8.6
1973–74	5.8	2.8	12.6	11.5	4.8
1974–75	11.1	10.8	11.9	13.3	1.1
1975–80	8.6	8.0	9.1	11.4	1.1
1975–76	9.0	11.0	8.3	9.9	-17.6
1976–77	12.5	12.2	22.8	11.5	7.3
1977–78	13.9	13.4	12.0	16.3	8.5
1978–79	11.7	9.3	7.7	17.8	9.0
1979–80	10.9	7.5	11.8	16.0	12.2
1980–85	8.5	2.8	14.8	18.4	7.9
1980–81	9.3	2.5	13.4	20.0	7.8
1981–82	11.5	8.8	11.3	15.2	15.7
1982–83	12.9	12.7	10.2	12.1	29.0
1983–84	12.2	11.6	8.6	14.7	1.8
1984–85	8.5	1.5	18.8	12.9	43.1

[1] Includes expenditures for drug research. These expenditures are included in the "drugs and sundries" component of the Health Care Financing Administration's National Health Expenditure Series, not under "research."
[2] Revised figures.
[3] Projected.

SOURCES: National Institutes of Health: *NIH Data Book, 1987*. Public Health Service, U.S. Department of Health and Human Services, NIH Pub. No. 88-1291, Dec. 1987; National Institutes of Health, Office of Program Planning and Evaluation: Selected data.

Table 111. Federal obligations for health research and development and percent distribution, according to agency: United States, selected fiscal years 1970–86

[Data are compiled from Federal Government sources]

Agency	1970[1]	1975[1]	1980	1983	1984	1985[2]	1986[2]
				Amount in millions			
Total	$1,667	$2,832	$4,723	$5,399	$6,087	$6,791	$6,895
				Percent distribution			
All Federal agencies	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Department of Health and Human Services	70.6	77.6	78.2	80.0	78.9	79.7	81.1
National Institutes of Health	52.4	66.4	67.4	70.2	69.9	71.1	72.6
Centers for Disease Control	---	1.5	1.8	1.4	0.7	0.7	0.8
Other Public Health Service	16.2	8.3	7.9	7.5	7.5	7.3	7.3
Other Department of Health and Human Services	2.0	1.3	1.1	0.8	0.7	0.6	0.5
Other agencies	29.4	22.4	21.8	20.0	21.1	20.3	18.9
Department of Agriculture	3.0	2.2	3.1	2.7	2.4	2.1	1.1
Department of Defense	7.5	4.1	4.5	5.7	6.8	6.5	7.2
Department of Education [3]	...	...	0.7	0.5	0.7	0.6	0.6
Department of Energy [4]	6.3	5.8	4.5	3.1	3.0	2.6	2.4
Department of the Interior	0.7	0.3	0.5	0.4	0.4	0.4	0.4
Environmental Protection Agency	...	1.3	1.7	0.7	0.7	0.8	0.5
International Development Cooperation Agency [5]	0.6	0.2	0.3	0.6	0.3	0.6	0.4
National Aeronautics and Space Administration	5.2	2.6	1.5	1.4	1.8	1.7	1.9
National Science Foundation	1.7	1.6	1.6	1.4	1.4	1.3	1.2
Veterans Administration	3.5	3.3	2.8	3.0	3.1	3.3	2.7
All other departments and agencies	0.9	1.0	0.4	0.4	0.3	0.4	0.4

[1] Data for fiscal year ending June 30; all other data for fiscal year ending September 30.
[2] Revised figures.
[3] Office of Handicapped Research, formerly included in other Department of Health and Human Services.
[4] Includes Atomic Energy Commission and Energy Research and Development Administration.
[5] Includes Department of State and Agency for International Development.

SOURCE: Office of Program Planning and Evaluation, National Institutes of Health, Public Health Service: Selected data.

Table 112. Obligations for human immunodeficiency virus (HIV)-related activities by National Institutes of Health and other Public Health Service agencies: United States, fiscal years 1982–97

Agency	1982	1983	1984	1985	1986[1]	1987
			Thousands of dollars			
Public Health Service, total	$5,555	$28,736	$61,460	$108,618	$233,812	$502,455
National Institutes of Health, total	3,355	21,866	44,121	63,737	134,667	260,907
National Institute on Aging	–	–	–	–	–	184
National Institute of Allergy and Infectious Diseases	297	9,223	19,618	23,273	63,276	145,760
National Institute of Arthritis and Musculoskeletal and Skin Disease	–	–	–	–	–	100
National Cancer Institute	2,400	9,790	16,627	26,874	45,050	63,755
National Institute of Child Health and Human Development	–	–	–	–	1,400	4,762
National Institute of Dental Research	25	25	81	97	1,712	3,247
National Institute of Diabetes and Digestive and Kidney Diseases	–	–	–	–	–	495
National Institute of Environmental Health Sciences	–	–	–	–	–	218
National Eye Institute	33	45	60	200	98	253
National Institute of General Medical Sciences	–	–	–	–	–	5,420
National Heart, Lung, and Blood Institute	5	1,202	4,871	9,323	15,468	17,244
National Institute of Neurological and Communicative Disorders and Stroke	31	684	1,510	1,168	1,435	3,685
Division of Research Resources	564	699	1,356	2,802	6,157	11,027
Office of the Director	–	–	–	–	73	4,759
Other Public Health Service, total	2,200	7,069	17,339	44,881	99,145	241,548
Alcohol, Drug Abuse, and Mental Health Administration	–	516	2,791	2,578	12,155	47,504
Centers for Disease Control	2,050	6,202	13,750	33,298	62,152	136,007
Food and Drug Administration	150	350	798	9,005	9,527	15,774
Health Resources and Services Administration	–	–	–	–	15,311	11,900
Office of the Assistant Secretary for Health	–	–	–	–	–	30,363

[1]Includes reimbursements where applicable (funds appropriated to Office of the Director but transferred to Institutes to be awarded and administered).

NOTES: The total personal medical care costs of AIDS in current dollars are estimated at $1.1 billion in 1985, increasing to $8.5 billion in 1991. (A. H. Scitovsky and D. P. Rice. Estimates of the direct and indirect costs of acquired immunodeficiency syndrome in the United States, 1985, 1986 and 1987. *Public Health Reports*. Jan.–Feb. 1987, Vol. 102, No. 1). An estimate in 1985 dollars for the personal medical care costs of patients diagnosed with AIDS, which included the cost of purchasing azidothymidine, was reported in 1988. These estimates are $2.2 billion in 1988 increasing to $4.8 billion in 1991. (F. J. Hellinger. Forecasting the personal medical care costs of AIDS from 1983 through 1991. *Public Health Reports*. May–June 1988, Vol. 103, No. 3).

SOURCE: National Institutes of Health: *NIH Data Book, 1988*. Public Health Service, U.S. Department of Health and Human Services, NIH Pub. No. 88–1281, Dec. 1988.

Table 113. Public health expenditures by State and territorial health agencies, according to source of funds and program area: United States, selected fiscal years 1976–86

Funds and program area	1976	1978	1980	1982	1983	1984	1985	1986
				Amount in millions				
Total	$2,539.8	$3,256.2	$4,450.8	$5,144.5	$5,610.3	$6,241.9	$6,949.5	$7,491.0
Source of funds								
Federal grants and contracts	796.9	1,133.2	1,573.1	1,777.8	2,001.2	2,344.0	2,555.7	2,699.6
Department of Agriculture	153.7	350.8	678.4	916.3	1,060.8	1,306.7	1,455.1	1,551.2
Other	643.2	782.3	894.7	861.4	940.4	1,037.3	1,100.7	1,148.4
State	1,486.7	1,802.1	2,513.3	2,922.9	3,108.0	3,352.2	3,809.6	4,126.0
Local	96.1	87.0	114.0	122.9	125.0	150.5	149.2	145.6
Fees, reimbursements, and other	161.2	233.8	250.3	321.0	376.1	395.3	435.0	519.7
Program area								
WIC[1]	137.7	337.2	660.7	889.7	1,049.5	1,268.6	1,431.1	1,534.1
Noninstitutional personal health other than WIC[2]	1,079.0	1,356.1	1,698.2	1,904.9	2,079.3	2,379.7	2,521.4	2,776.9
State health agency-operated institutions	531.1	641.1	819.3	949.6	967.5	978.7	1,153.4	1,235.8
Environmental health	199.2	237.0	298.0	354.6	363.7	414.8	467.0	479.8
Health resources	208.2	297.2	356.5	360.2	550.1	562.6	626.7	650.9
Laboratory	104.1	131.1	161.1	181.6	191.6	214.1	229.2	237.9
Other[3]	280.6	256.3	457.0	503.9	408.7	423.2	520.8	575.6
				Percent distribution				
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Source of funds								
Federal grants and contracts	31.4	34.8	35.3	34.6	35.7	37.6	36.8	36.0
Department of Agriculture	6.1	10.8	15.2	17.8	18.9	20.9	20.9	20.7
Other	25.3	24.0	20.1	16.7	16.8	16.6	15.8	15.3
State	58.5	55.3	56.5	56.8	55.4	53.7	54.8	55.1
Local	3.8	2.7	2.6	2.4	2.2	2.4	2.1	1.9
Fees, reimbursements, and other	6.3	7.2	5.6	6.2	6.7	6.3	6.3	6.9
Program area								
WIC[1]	5.4	10.4	14.8	17.3	18.7	20.3	20.6	20.5
Noninstitutional personal health other than WIC[2]	42.5	41.6	38.2	37.0	37.1	38.1	36.3	37.1
State health agency-operated institutions	20.9	19.7	18.4	18.5	17.2	15.7	16.6	16.5
Environmental health	7.8	7.3	6.7	6.9	6.5	6.6	6.7	6.4
Health resources	8.2	9.1	8.0	7.0	9.8	9.0	9.0	8.7
Laboratory	4.1	4.0	3.6	3.5	3.4	3.4	3.3	3.2
Other[3]	11.0	7.9	10.3	9.8	7.3	6.8	7.5	7.7

[1]Supplemental Food Program for Women, Infants, and Children.
[2]Includes funds for maternal and child health services other than WIC, handicapped children's services, communicable disease control, dental health, chronic disease control, mental health, alcohol and drug abuse, and supporting personal health programs.
[3]Funds for general administration and funds to local health departments not allocated to program areas.

NOTE: Data are reported for 55 health agencies in 50 States, the District of Columbia, and 4 territories (Puerto Rico, American Samoa, Guam, and the Virgin Islands).

SOURCES: Public Health Foundation: *Public Health Agencies 1987: Expenditures and Sources of Funds*. Washington. 1987; Unpublished data.

Table 114. Personal health care per capita expenditures and average annual percent change, according to geographic division and State: United States, selected years 1966–82

[Data are compiled by the Health Care Financing Administration]

Geographic division and State	1966	1969	1972	1976	1980	1982	Average annual percent change 1966–80	Average annual percent change 1980–82
	Per capita amount							
United States	$201	$260	$381	$ 605	$ 958	$1,220	11.8	12.8
New England	234	326	441	686	1,058	1,356	11.4	13.2
Maine	173	242	328	542	870	1,091	12.2	12.0
New Hampshire	188	245	330	507	759	966	10.5	14.0
Vermont	197	274	352	531	778	978	10.3	12.1
Massachusetts	253	360	489	760	1,175	1,508	11.6	13.3
Rhode Island	231	315	413	672	1,062	1,351	11.5	12.8
Connecticut	238	330	438	675	1,046	1,348	11.2	13.5
Middle Atlantic	227	319	425	662	1,017	1,310	11.3	13.5
New York	258	368	488	745	1,107	1,417	11.0	13.1
New Jersey	192	264	355	578	877	1,115	11.5	12.8
Pennsylvania	201	279	372	590	972	1,273	11.9	14.4
East North Central	203	278	378	610	978	1,249	11.9	13.0
Ohio	195	264	361	597	958	1,247	12.0	14.1
Indiana	182	252	337	542	861	1,101	11.7	13.1
Illinois	220	300	407	634	1,033	1,308	11.7	12.5
Michigan	211	286	388	635	1,014	1,281	11.9	12.4
Wisconsin	192	269	373	610	952	1,219	12.1	13.2
West North Central	200	273	369	597	973	1,241	12.0	12.9
Minnesota	216	287	389	602	976	1,229	11.4	12.2
Iowa	197	265	351	563	935	1,176	11.8	12.1
Missouri	198	273	365	627	997	1,285	12.2	13.5
North Dakota	197	273	367	676	1,034	1,325	12.6	13.2
South Dakota	181	241	327	522	867	1,154	12.0	14.1
Nebraska	195	268	371	596	948	1,216	12.0	13.3
Kansas	195	270	379	568	988	1,271	12.3	13.4
South Atlantic	189	242	342	551	879	1,115	12.5	12.6
Delaware	209	286	381	599	912	1,153	11.1	12.4
Maryland	190	273	390	609	957	1,232	12.2	13.5
District of Columbia	430	667	958	1,349	2,198	2,838	12.4	13.6
Virginia	151	213	301	493	811	1,054	12.8	14.0
West Virginia	161	227	313	508	808	1,057	12.2	14.4
North Carolina	143	204	282	461	737	931	12.4	12.4
South Carolina	125	182	251	423	686	857	12.9	11.8
Georgia	150	217	319	515	843	1,048	13.1	11.5
Florida	184	264	377	623	975	1,228	12.6	12.2
East South Central	148	211	294	483	798	1,025	12.8	13.3
Kentucky	155	218	286	444	739	957	11.8	13.8
Tennessee	166	232	324	531	874	1,144	12.6	14.4
Alabama	145	210	300	501	809	1,033	13.1	13.0
Mississippi	115	163	242	425	730	897	14.1	10.8
West South Central	170	242	331	533	859	1,096	12.3	13.0
Arkansas	142	198	284	470	766	994	12.8	13.9
Louisiana	156	228	322	511	857	1,106	12.9	13.6
Oklahoma	183	263	351	539	852	1,086	11.6	12.9
Texas	177	249	338	549	876	1,110	12.1	12.6
Mountain	189	259	348	541	849	1,070	11.3	12.3
Montana	175	236	325	510	801	1,036	11.5	13.7
Idaho	153	210	292	455	695	868	11.4	11.8
Wyoming	200	268	327	451	710	873	9.5	10.9
Colorado	233	311	396	605	942	1,209	10.5	13.3
New Mexico	157	214	282	458	722	904	11.5	11.9
Arizona	190	271	378	582	882	1,112	11.6	12.3
Utah	158	211	286	458	714	896	11.4	12.0
Nevada	196	282	389	658	1,163	1,380	13.6	8.9
Pacific	234	328	440	691	1,093	1,380	11.6	12.4
Washington	219	297	390	584	915	1,165	10.8	12.8
Oregon	197	274	364	567	912	1,165	11.6	13.0
California	242	340	460	727	1,152	1,451	11.8	12.2
Alaska	227	289	340	560	961	1,187	10.9	11.1
Hawaii	208	300	401	598	932	1,228	11.3	14.8

NOTE: Per capita spending estimates are the expenditure level of services rendered in a geographic area per resident population. Per capita figures cannot be interpreted directly as spending per resident unless substantially all of the services provided in a State are consumed by residents of that State. U.S. estimates do not include services provided in U.S. territories or possessions, services rendered by U.S. taxpayers while living abroad, and services furnished to U.S. personnel living abroad or on military vessels.

SOURCE: Office of the Actuary: Personal health care expenditures by State, selected years 1966–1982, by K. R. Levit. *Health Care Financing Review*. HCFA Pub. No. 03169. Health Care Financing Administration. Washington. U.S. Government Printing Office, summer 1985.

Table 115. Hospital care per capita expenditures and average annual percent change, according to geographic division and State: United States, selected years 1966–82

[Data are compiled by the Health Care Financing Administration]

Geographic division and State	1966	1969	1972	1976	1980	1982	Average annual percent change 1966–80	Average annual percent change 1980–82
	Per capita amount							
United States	$ 80	$119	$166	$276	$ 441	$ 577	13.0	14.4
New England	101	151	207	335	515	669	12.3	14.0
Maine	74	107	138	246	411	517	13.0	12.2
New Hampshire	73	98	134	213	334	458	11.5	17.1
Vermont	86	126	162	242	338	443	10.3	14.5
Massachusetts	116	178	247	400	624	810	12.8	13.9
Rhode Island	101	148	196	328	492	623	12.0	12.5
Connecticut	91	133	185	296	444	578	12.0	14.1
Middle Atlantic	94	144	200	328	495	641	12.6	13.8
New York	110	171	236	377	540	679	12.0	12.1
New Jersey	71	103	145	254	371	498	12.5	15.9
Pennsylvania	82	127	178	300	505	675	13.9	15.6
East North Central	81	117	167	286	465	615	13.3	15.0
Ohio	74	107	154	273	446	599	13.7	15.9
Indiana	63	95	134	235	383	512	13.8	15.6
Illinois	90	132	195	323	539	700	13.6	14.0
Michigan	90	123	170	295	477	628	12.7	14.7
Wisconsin	76	117	163	268	401	539	12.6	15.9
West North Central	79	117	158	270	451	592	13.3	14.6
Minnesota	89	122	168	272	425	540	11.8	12.7
Iowa	69	103	139	238	404	536	13.5	15.2
Missouri	81	123	164	295	510	679	14.0	15.4
North Dakota	83	121	156	283	479	624	13.3	14.1
South Dakota	75	101	133	234	398	530	12.7	15.4
Nebraska	75	115	157	259	429	568	13.3	15.1
Kansas	76	116	160	269	451	593	13.6	14.7
South Atlantic	68	103	151	252	411	539	13.7	14.5
Delaware	91	131	174	291	437	552	11.9	12.4
Maryland	84	122	185	287	464	606	13.0	14.3
District of Columbia	192	334	564	903	1,516	2,021	15.9	15.5
Virginia	63	92	132	218	372	506	13.5	16.6
West Virginia	70	107	152	264	424	564	13.7	15.3
North Carolina	57	85	121	201	324	428	13.2	14.9
South Carolina	51	79	107	188	303	397	13.6	14.5
Georgia	58	86	135	228	386	492	14.8	12.9
Florida	66	103	151	268	434	569	14.4	14.5
East South Central	60	91	131	226	383	507	14.2	15.1
Kentucky	60	91	121	202	326	433	12.9	15.2
Tennessee	67	102	149	252	430	578	14.2	15.9
Alabama	61	92	134	238	408	541	14.5	15.2
Mississippi	48	73	111	198	343	431	15.1	12.1
West South Central	66	97	135	229	380	500	13.3	14.7
Arkansas	56	77	114	197	324	443	13.4	16.9
Louisiana	63	94	145	239	412	549	14.4	15.4
Oklahoma	63	102	132	224	378	498	13.7	14.8
Texas	69	101	137	233	379	495	12.9	14.3
Mountain	76	109	145	234	377	483	12.1	13.2
Montana	67	95	122	193	336	445	12.2	15.1
Idaho	50	75	104	162	254	335	12.3	14.8
Wyoming	85	116	123	188	313	398	9.8	12.8
Colorado	100	136	171	274	422	557	10.6	14.9
New Mexico	69	96	122	222	348	449	12.3	13.6
Arizona	78	119	169	256	396	498	12.3	12.1
Utah	58	81	114	188	307	399	12.6	14.0
Nevada	68	108	151	273	540	630	16.0	8.0
Pacific	85	123	169	280	445	583	12.6	14.5
Washington	72	102	133	223	337	434	11.7	13.5
Oregon	66	96	127	219	347	468	12.6	16.1
California	88	129	180	298	479	626	12.9	14.3
Alaska	149	173	164	255	446	552	8.1	11.3
Hawaii	79	115	146	222	352	479	11.3	16.7

NOTE: Per capita spending estimates are the expenditure level of services rendered in a geographic area per resident population. Per capita figures cannot be interpreted directly as spending per resident unless substantially all of the services provided in a State are consumed by residents of that State.

SOURCE: Office of the Actuary: Personal health care expenditures by State, selected years 1966–1982, by K. R. Levit. *Health Care Financing Review*. HCFA Pub. No. 03186. Health Care Financing Administration. Washington. U.S. Government Printing Office, summer 1985.

Table 118. Nursing home care per capita expenditures and average annual percent change, according to geographic division and State: United States, selected years 1966–82

[Data are compiled by the Health Care Financing Administration]

Geographic division and State	1966	1969	1972	1976	1980	1982	Average annual percent change 1966–80	Average annual percent change 1980–82
	Per capita amount							
United States	$12	$19	$31	$52	$ 90	$114	15.5	12.5
New England	20	28	47	85	145	186	15.2	13.3
Maine	15	23	40	70	134	176	16.1	14.6
New Hampshire	16	20	35	43	71	90	11.2	12.6
Vermont	19	27	39	75	121	149	14.1	11.0
Massachusetts	22	32	52	94	152	192	14.8	12.4
Rhode Island	15	21	34	78	159	214	18.9	12.5
Connecticut	19	29	49	90	156	206	16.2	14.9
Middle Atlantic	14	21	36	66	108	145	15.7	15.9
New York	16	26	46	85	135	184	16.5	16.7
New Jersey	10	15	24	45	77	97	15.7	12.2
Pennsylvania	12	18	28	48	88	116	15.3	14.8
East North Central	12	19	31	54	97	125	16.1	13.5
Ohio	12	18	27	53	99	143	16.3	20.2
Indiana	12	20	33	57	102	129	16.5	12.5
Illinois	13	20	33	52	90	109	14.8	10.1
Michigan	10	17	27	48	86	106	16.6	11.0
Wisconsin	14	22	39	71	120	150	16.6	11.8
West North Central	18	28	44	69	131	172	15.2	14.6
Minnesota	22	33	57	91	175	235	16.0	15.9
Iowa	22	36	51	81	143	168	14.3	8.4
Missouri	12	19	29	47	95	139	15.9	21.0
North Dakota	19	33	47	60	112	154	13.5	17.3
South Dakota	18	30	49	69	132	165	15.3	11.6
Nebraska	17	27	42	68	112	140	14.4	11.8
Kansas	18	26	42	65	130	163	15.2	12.0
South Atlantic	8	12	20	33	59	77	15.3	14.2
Delaware	8	12	20	42	67	86	16.4	13.3
Maryland	9	17	24	46	75	102	16.4	16.6
District of Columbia	6	10	16	22	43	55	15.1	13.1
Virginia	6	9	16	30	63	85	18.3	16.2
West Virginia	3	5	12	20	41	62	20.5	23.0
North Carolina	6	11	16	30	58	75	17.6	13.7
South Carolina	6	9	16	28	62	76	18.2	10.7
Georgia	8	13	23	37	67	79	16.4	8.6
Florida	11	15	25	31	48	65	11.1	16.4
East South Central	7	11	20	35	67	86	17.5	13.3
Kentucky	9	14	23	40	81	104	17.0	13.3
Tennessee	6	10	17	28	56	76	17.3	16.5
Alabama	8	14	22	40	62	79	15.8	12.9
Mississippi	4	7	15	30	71	90	22.8	12.6
West South Central	12	19	31	48	79	94	14.4	9.1
Arkansas	13	21	34	50	95	112	15.3	8.6
Louisiana	8	13	22	38	68	89	16.5	14.4
Oklahoma	19	31	47	58	91	111	11.8	10.4
Texas	11	18	30	48	78	88	15.0	6.2
Mountain	10	15	23	35	59	74	13.5	12.0
Montana	12	17	33	43	66	92	12.9	18.1
Idaho	12	17	26	45	69	84	13.3	10.3
Wyoming	6	12	23	24	38	49	14.1	13.6
Colorado	15	21	33	54	86	104	13.3	10.0
New Mexico	5	9	15	16	34	49	14.7	20.0
Arizona	8	13	17	22	41	53	12.4	13.7
Utah	9	12	17	30	55	63	13.8	7.0
Nevada	7	10	20	29	60	82	16.6	16.9
Pacific	12	18	31	48	82	97	14.7	8.8
Washington	16	21	43	61	109	137	14.7	12.1
Oregon	17	24	37	57	94	113	13.0	9.6
California	11	18	30	47	78	91	15.0	8.0
Alaska	1	2	9	17	14	26	20.7	36.3
Hawaii	6	10	18	28	36	63	13.7	32.3

NOTE: Per capita spending estimates are the expenditure level of services rendered in a geographic area per resident population. Per capita figures cannot be interpreted directly as spending per resident unless substantially all of the services provided in a State are consumed by residents of that State.

SOURCE: Office of the Actuary: Personal health care expenditures by State, selected years 1966–1982, by K. R. Levit. *Health Care Financing Review*. HCFA Pub. No. 03189. Health Care Financing Administration. Washington. U.S. Government Printing Office, summer 1986.

Table 117. Health care coverage for persons under 65 years of age, according to type of coverage and selected characteristics: United States, 1980, 1982, and 1986

[Data are based on household interviews of a sample of the civilian noninstitutionalized population]

Characteristic	Private insurance			Medicaid[1]			Not covered[2]		
	1980	1982	1986	1980	1982	1986	1980	1982	1986
	Percent of population								
Total[3,4]	78.8	77.3	75.9	5.9	5.6	5.9	12.5	14.7	15.3
Age									
Under 15 years	74.7	72.7	71.4	10.2	9.8	10.4	12.8	15.8	16.1
Under 5 years	70.3	69.7	68.0	12.0	11.4	12.0	15.2	17.0	17.5
5–14 years	76.7	74.2	73.1	9.4	8.9	9.5	11.7	15.2	15.3
15–44 years	79.3	77.8	75.8	4.2	4.1	4.1	14.2	16.5	17.4
45–64 years	83.6	83.1	82.4	3.1	2.7	3.0	8.6	9.7	10.3
Sex[3]									
Male	79.5	78.0	76.4	4.7	4.5	4.8	12.7	14.8	15.6
Female	78.2	76.7	75.4	7.1	6.6	6.8	12.2	14.5	14.9
Race[3]									
White	81.9	80.4	79.1	3.9	3.6	4.0	11.4	13.5	14.0
Black	60.1	59.6	57.0	17.9	17.2	17.4	19.0	21.2	22.6
Family income[3,5]									
Less than $10,000	38.6	38.3	31.3	27.6	24.9	28.4	31.0	35.0	37.0
$10,000–$14,999	61.1	67.6	58.1	9.2	4.4	8.8	25.9	24.7	31.3
$15,000–$19,999	79.0	81.3	72.6	3.0	2.0	*2.7	15.0	14.2	21.2
$20,000–$34,999	90.2	91.8	88.3	1.1	0.7	*1.0	6.2	5.7	8.4
$35,000 or more	93.7	93.8	93.7	0.6	0.5	*0.4	3.9	4.1	3.9
Geographic region[3]									
Northeast	81.7	80.5	81.6	7.0	6.9	5.9	10.3	11.0	10.7
Midwest	83.8	82.0	79.7	5.8	5.6	7.6	9.0	10.9	10.9
South	75.6	74.3	71.6	4.8	4.6	5.1	15.0	17.5	19.2
West	74.3	72.4	72.9	6.5	5.8	5.1	15.3	19.1	18.8
Location of residence[3]									
Within MSA	79.7	78.0	76.8	6.2	6.0	5.7	11.3	13.6	14.5
Outside MSA	77.0	75.9	72.7	5.2	4.7	6.2	14.8	17.0	18.2

[1] Includes persons receiving Aid to Families with Dependent Children or Supplemental Security Income or those with current Medicaid cards.
[2] Includes persons not covered by private insurance, Medicaid, Medicare, and military plans.
[3] Age adjusted.
[4] Includes all other races not shown separately and unknown family income.
[5] Family income categories for 1982 and 1986. Income categories in 1980 are less than $7,000; $7,000–$9,999; $10,000–$14,999; $15,000–$24,999; $25,000 or more.

*Relative standard error greater than 30 percent.

NOTES: Denominators include persons with unknown health insurance (1.7 percent in 1986). Percents do not add to 100 because the percent with other types of health insurance (e.g., Medicare, military) and unknown health insurance are not shown, and because persons with both private insurance and Medicaid appear in both columns.

SOURCE: Division of Health Interview Statistics, National Center for Health Statistics: Data from the National Health Interview Survey.

Table 118. Health care coverage for persons 65 years of age and over, according to type of coverage and selected characteristics: United States, 1980, 1982, and 1989

[Data are based on household interviews of a sample of the civilian noninstitutionalized population]

Characteristic	Medicare and private insurance			Medicare and Medicaid[1]			Medicare[2]		
	1980	1982	1989	1980	1982	1989	1980	1982	1989
	Percent of population								
Total[3,4]	64.4	65.5	71.8	8.1	6.1	5.8	22.7	23.1	17.9
Age									
65–74 years	67.0	68.2	73.5	6.8	4.8	4.9	20.6	20.5	15.7
75 years and over	59.9	60.6	68.2	10.3	8.3	7.3	26.4	27.7	21.7
75–84 years	61.9	62.7	70.4	9.7	8.1	7.0	24.8	26.0	19.8
85 years and over	51.2	51.3	58.7	12.7	9.3	8.8	33.0	34.9	29.6
Sex[3]									
Male	65.6	66.2	72.8	5.7	4.3	3.7	23.1	23.4	18.4
Female	63.6	65.0	70.8	9.6	7.3	7.3	22.4	23.0	17.5
Race[3]									
White	66.3	66.9	75.4	6.6	4.8	4.5	21.0	21.6	16.1
Black	26.5	33.0	34.2	23.3	18.2	19.7	40.6	38.5	34.9
Family income[3,5]									
Less than $10,000	53.4	55.6	54.7	15.7	11.7	14.4	28.2	28.9	27.1
$10,000–$14,999	72.9	76.3	78.0	4.8	3.3	*3.9	19.1	17.3	15.6
$15,000–$19,999	74.1	74.1	82.8	3.9	1.8	*2.0	18.3	17.8	11.6
$20,000–$34,999	74.4	74.6	82.0	2.5	*1.2	*2.2	16.8	17.9	10.0
$35,000 or more	71.9	73.7	77.5	2.2	*1.3	*1.4	18.3	16.0	13.9
Geographic region[3]									
Northeast	67.4	66.6	74.1	5.6	4.1	4.1	22.3	23.3	17.9
Midwest	71.2	71.3	77.7	4.9	3.1	3.8	19.9	21.2	14.5
South	58.9	60.2	65.3	10.8	9.2	8.0	25.6	25.4	21.0
West	60.7	65.3	70.6	10.9	7.2	6.6	21.7	21.5	18.2
Location of residence[3]									
Within MSA	64.2	66.1	71.7	7.5	5.0	5.2	23.0	22.8	17.8
Outside MSA	64.9	64.3	71.2	9.2	7.8	7.2	22.2	23.7	18.1

[1] Includes persons receiving Aid to Families with Dependent Children or Supplemental Security Income or those with current Medicaid cards.
[2] Includes persons not covered by private insurance or Medicaid.
[3] Age adjusted.
[4] Includes all other races not shown separately and unknown family income.
[5] Family income categories for 1982 and 1989. Income categories in 1980 are less than $7,000; $7,000–$9,999; $10,000–$14,999; $15,000–$24,999; $25,000 or more.

*Relative standard error greater than 30 percent.

NOTES: Persons with Medicare, private insurance, and Medicaid appear in both columns. Denominators include persons with unknown health insurance (0.8 percent in 1989). In 1989, 5.0 percent of all persons 65 years of age and over had no Medicare but only 0.8 percent were without health insurance.

SOURCE: Division of Health Interview Statistics, National Center for Health Statistics: Data from the National Health Interview Survey.

Copyright material has been deleted, not available for Microfiche Edition.

Table 123. Medicare enrollees and Medicaid recipients and expenditures and percent distribution, according to type of service: United States, selected years 1967–96

[Data are compiled by the Health Care Financing Administration]

Type of service	1967	1970	1975	1980	1993	1994	1995	1996
Medicare				Number in millions				
Enrollees[1]	19.5	20.5	25.0	28.5	36.0	36.5	37.1	37.7
				Amount in billions				
All expenditures	$4.5	$7.1	$15.6	$35.7	$57.4	$62.9	$70.5	$76.0
				Percent distribution of expenditures				
All services	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Hospital care	69.1	71.5	73.8	72.6	70.5	70.1	69.3	68.0
Physician services	24.7	22.8	21.6	22.1	23.4	23.3	24.0	25.0
Nursing home care	4.6	3.7	1.9	1.1	0.9	0.9	0.8	0.8
Other health services[2]	1.6	1.9	2.8	4.1	5.3	5.7	5.9	6.2
Medicaid				Number in millions				
Recipients[3]	---	---	22.0	21.6	21.6	21.6	21.8	22.4
				Amount in billions				
All expenditures[4]	$2.9	$5.2	$13.5	$25.2	$33.9	$36.3	$40.1	$43.6
				Percent distribution of expenditures				
All services	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Hospital care	42.3	42.9	35.3	38.1	38.0	38.0	37.2	36.3
Physician services	10.9	13.3	13.9	9.7	8.8	8.4	8.8	9.1
Dentist services	4.4	3.2	2.7	2.0	1.4	1.2	1.2	1.2
Other professional services	0.9	1.4	1.8	2.3	3.1	3.2	3.3	3.5
Drugs and medical sundries	7.2	7.9	6.6	5.5	5.5	5.7	6.0	6.6
Nursing home care	31.7	27.2	35.6	38.8	38.4	37.8	37.0	36.3
Other health services[5]	2.6	4.1	4.1	3.7	4.9	5.7	6.5	7.0

[1]Number enrolled in the hospital insurance and/or supplementary medical insurance programs on July 1.
[2]Other services include the national health account service categories "eyeglasses and appliances" and "other professional services" (including home health services).
[3]Unduplicated count of recipients during the fiscal year.
[4]Calendar year expenditures from Federal, State, and local funds under Medicaid. Includes per capita payments for Part B of Medicare and excludes administrative costs.
[5]Other services include the national health account category of "other health services," which includes family-planning services and early and periodic screening, diagnosis, and treatment (EPSDT) services.

SOURCE: Division of National Cost Estimates, Office of the Actuary: National health expenditures, 1998–2000. *Health Care Financing Review.* Vol. 8, No. 4. HCFA Pub. No. 03239. Health Care Financing Administration. Washington. U.S. Government Printing Office, Aug. 1987.

Table 121. Medicare enrollment, persons served, and reimbursements for Medicare enrollees 65 years of age and over, according to selected characteristics: United States, selected years 1967–86

(Data are compiled by the Health Care Financing Administration)

Characteristic	Enrollment in millions[1]			Persons served per 1,000 enrollees[2]			Reimbursements per person served[3]			Reimbursements per enrollee[3]		
	1967	1977	1986	1967	1977	1986	1967	1977	1986	1967	1977	1986
Total[4]	19.5	23.8	28.2	367	570	732	$592	$1,332	$2,870	$217	$ 759	$2,146
Age												
65–66 years	2.8	3.3	3.7	300	533	652	486	1,075	2,118	149	573	1,453
67–68 years	2.6	3.2	3.5	326	511	656	521	1,173	2,441	170	599	1,604
69–70 years	2.4	2.9	3.3	339	531	689	539	1,211	2,579	180	643	1,776
71–72 years	2.3	2.6	3.1	351	555	719	560	1,228	2,777	197	681	2,032
73–74 years	2.1	2.3	2.7	368	576	735	574	1,319	2,910	212	759	2,199
75–79 years	3.9	4.5	5.5	398	597	768	624	1,430	3,100	248	853	2,433
80–84 years	2.2	3.0	3.5	430	623	808	693	1,549	3,310	298	965	2,749
85 years and over	1.3	2.1	2.9	465	652	827	740	1,638	3,477	345	1,068	2,946
Sex												
Male	8.3	9.6	11.3	357	546	691	647	1,505	3,272	231	821	1,956
Female	11.3	14.2	16.9	373	586	759	554	1,223	2,626	207	717	2,036
Race[5]												
White	17.4	21.1	24.7	375	576	738	593	1,328	2,842	222	765	2,139
Other	1.5	2.1	2.6	260	514	683	557	1,404	3,185	145	722	2,252
Geographic region[6]												
Northeast	5.1	5.7	6.4	385	613	775	604	1,425	2,933	233	874	2,306
Midwest	5.6	6.3	7.2	352	541	729	599	1,401	2,894	211	757	2,141
South	5.6	7.5	9.2	351	556	736	528	1,198	2,744	186	666	2,073
West	2.9	3.8	4.9	455	632	727	620	1,341	3,051	282	848	2,292

[1]Includes fee-for-service and Health Maintenance Organization (HMO) enrollees.
[2]Excludes HMO enrollees.
[3]Excludes amounts for HMO services.
[4]Includes the U.S. population residing in the United States, Puerto Rico, Virgin Islands, Guam, other outlying areas, and foreign countries and residence unknown.
[5]Excludes persons of unknown race.
[6]Includes the resident population of the United States but not residence unknown.

SOURCE: Bureau of Data Management and Strategy, Health Care Financing Administration: Unpublished data.

Table 122. Selected rates of non-Federal short-stay hospital utilization and benefit payments for aged and disabled Medicare enrollees, according to geographic division: United States, 1980, 1984, and 1986

[Data are compiled by the Health Care Financing Administration]

Geographic division	Discharges from short-stay hospitals			Average length of stay in short-stay hospitals			Average days of care in short-stay hospitals		
	1980	1984	1986	1980	1984	1986	1980	1984	1986
	Number per 1,000 hospital insurance enrollees			Number of days per hospital discharge			Number per 1,000 hospital insurance enrollees		
United States	372	371	327	10.8	8.9	8.7	4,016	3,297	2,845
New England	333	343	307	12.1	10.4	10.0	4,130	3,562	3,078
Middle Atlantic	329	348	319	13.4	11.8	10.9	4,528	4,090	3,465
East North Central	373	387	325	11.2	9.0	8.7	4,243	3,286	2,843
West North Central	426	400	339	9.9	7.9	7.8	4,371	3,176	2,658
South Atlantic	372	375	326	10.3	8.6	8.6	3,880	3,205	2,814
East South Central	436	450	420	9.6	8.1	8.1	4,260	3,649	3,398
West South Central	433	436	380	9.1	7.7	7.8	4,025	3,364	2,807
Mountain	360	333	307	8.7	7.3	7.1	3,243	2,432	2,183
Pacific	338	326	285	8.7	7.3	7.3	2,988	2,389	2,083

Geographic division	Average total charges in short-stay hospitals[1]			Benefit payments					
				Hospital insurance[2]			Supplementary medical insurance		
	1980	1984	1986	1980	1984	1986	1980	1984	1986
	Amount per day			Amount per enrollee					
United States	$296	$552	$687	$ 909	$1,466	$1,624	$360	$572	$ 863
New England	295	496	607	978	1,543	1,607	402	672	849
Middle Atlantic	304	502	608	965	1,598	1,662	428	783	992
East North Central	298	560	689	1,009	1,542	1,785	370	636	819
West North Central	246	508	643	885	1,387	1,586	304	477	687
South Atlantic	277	538	668	816	1,346	1,475	384	663	848
East South Central	249	491	625	754	1,296	1,451	281	479	603
West South Central	259	516	683	798	1,434	1,581	352	652	730
Mountain	310	623	794	782	1,269	1,406	368	625	778
Pacific	424	819	962	1,003	1,551	1,790	509	863	1,144

[1]Includes charges for Medicare covered and not covered services and days. For these years billing reimbursements represented about 65-70 percent of hospital total charges.
[2]Benefit payments represent cash-flow disbursements from the Medicare Hospital Insurance and Supplementary Medical Insurance Trust Funds for all types of covered services and include retroactive adjustments for nonbilling reimbursement such as Prospective Payment System passthroughs (capital, direct medical education, kidney acquisitions, and bad debts by Medicare patients), indirect medical education, lump sum interim payments, and audited fiscal year cost adjustments. Approximately 90 percent of total benefit payments are for short-stay hospital services.

SOURCE: Health Care Financing Administration: Unpublished data.

Table 123. Recipients and Medicaid medical vendor payments, according to basis of eligibility: United States, selected years 1972–87

[Data are compiled by the Health Care Financing Administration]

Basis of eligibility	1972[1]	1975[1]	1980[2]	1984[2]	1985[2]	1986[2]	1987[2]
Recipients				Number in millions			
All recipients	17.6	22.0	21.6	21.6	21.8	22.4	23.2
				Percent distribution			
Total	100.0	100.0	...	...	...	...	...
Aged[3]	18.8	16.5	15.9	15.0	14.0	14.0	14.1
Blind and disabled	9.8	11.2	13.5	13.5	13.8	14.2	14.6
Adults in AFDC[4] families	17.8	20.6	22.6	26.0	25.3	25.1	24.3
Children in AFDC[4] families	44.5	43.7	43.2	44.7	44.7	44.4	44.1
Other Title XIX[5]	9.0	8.2	6.9	5.5	5.6	6.1	6.1
Vendor payments				Amount in billions			
All payments	$6.3	$12.2	$23.3	$33.9	$37.5	$40.9	$45.2
				Percent distribution			
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Aged[3]	30.6	35.6	37.5	37.8	37.6	36.9	35.7
Blind and disabled	22.2	25.7	32.7	35.3	35.9	36.4	37.2
Adults in AFDC[4] families	15.3	16.8	13.9	13.0	12.7	11.9	12.4
Children in AFDC[4] families	18.1	17.9	13.4	11.7	11.8	12.5	12.3
Other Title XIX[5]	13.9	4.0	2.6	2.1	2.1	2.4	2.4

[1] Data for fiscal year ending June 30.
[2] Data for fiscal year ending September 30. Recipients included in more than one category.
[3] 65 years and over.
[4] Aid to Families with Dependent Children.
[5] Includes some participants in Supplemental Security Income program and other people deemed medically needy in participating States.

SOURCE: Office of the Actuary, Health Care Financing Administration: Unpublished data.

Table 124. Veterans medical care expenditures and percent distribution, according to type of service: United States, selected fiscal years 1955–87

[Data are compiled from Veterans Administration sources]

Type of service	1955[1]	1970[1]	1975[1]	1980	1984	1985	1986	1987[2]
				Number in thousands				
Patients treated								
Inpatient hospital	730	787	1,085	1,235	1,200	1,208	1,328	1,077
Outpatient care	5,887	7,312	13,799	18,206	18,587	19,586	20,186	21,869
Veterans Administration nursing homes and domiciliaries	---	34	30	28	30	34	37	40
Community nursing homes	---	15	24	28	36	39	41	42
All other[3]	---	43	53	57	55	56	58	62
				Amount in millions				
Expenditures								
All expenditures[4]	$1,150	$1,889	$3,328	$5,981	$8,301	$8,936	$9,275	$9,673
				Percent distribution				
All services	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Inpatient hospital	81.9	71.3	66.4	64.3	61.3	60.3	57.2	55.5
Outpatient care	12.0	14.0	17.8	19.1	18.7	18.9	20.7	21.5
Veterans Administration nursing homes and domiciliaries	2.9	4.3	4.8	5.1	5.5	5.4	5.9	6.2
Community nursing homes	0.0	1.2	1.4	2.0	2.8	3.0	3.3	3.4
All other[3]	3.2	9.1	9.6	9.6	11.7	12.4	12.9	13.4

[1]Data for fiscal year ending June 30; all other data for fiscal year ending September 30.
[2]Reflects reclassification of 1-day dialysis treatment of ambulatory patients as an outpatient procedure rather than a 1-day hospital admission.
[3]Includes miscellaneous benefits and services, contract hospitals, education and training, subsidies to State veterans hospitals, nursing homes, and domiciliaries, and the Civilian Health and Medical Program of the Veterans Administration.
[4]Medical care expenditures exclude construction, medical administration, and miscellaneous operating expenses.

SOURCE: Budget Office, Veterans Administration: Unpublished data.

Table 128. State mental health agency per capita expenditures for mental health services, by State: United States, fiscal years 1981, 1983, and 1985

State	1981	1983	1985
United States	$26.67	$30.64	$34.99
Alabama	19.92	24.15	27.78
Alaska	37.88	41.17	44.85
Arizona	9.99	9.51	12.06
Arkansas	16.82	20.27	23.80
California	28.41	28.88	33.51
Colorado	23.83	24.88	27.72
Connecticut	31.77	39.22	44.02
Delaware	44.38	51.33	46.05
District of Columbia	---	23.36	27.82
Florida	19.89	22.66	25.52
Georgia	25.10	26.28	23.38
Hawaii	18.89	21.95	22.66
Idaho	13.39	14.99	14.99
Illinois	17.83	21.00	23.73
Indiana	18.83	22.74	27.44
Iowa	7.89	9.56	10.51
Kansas	17.47	22.28	26.85
Kentucky	14.84	16.95	18.82
Louisiana	18.85	23.29	25.62
Maine	25.12	31.90	36.15
Maryland	32.96	37.39	39.96
Massachusetts	31.83	35.95	46.11
Michigan	32.49	38.65	48.96
Minnesota[1]	16.91	29.92	31.96
Mississippi	13.69	16.31	23.78
Missouri	23.57	24.62	27.72
Montana	24.49	28.02	29.20
Nebraska	16.48	19.15	21.29
Nevada	21.81	25.20	25.95
New Hampshire	34.70	38.84	42.02
New Jersey	26.27	31.32	35.65
New Mexico	23.73	24.93	24.80
New York	66.84	74.06	90.12
North Carolina	23.82	28.53	37.81
North Dakota	35.46	41.92	36.25
Ohio	24.72	28.48	30.41
Oklahoma	22.07	33.02	30.89
Oregon	20.45	21.35	24.89
Pennsylvania	40.54	47.44	52.39
Rhode Island	36.03	31.54	35.00
South Carolina	30.79	32.61	32.61
South Dakota	17.06	20.73	21.73
Tennessee	17.79	19.97	22.75
Texas	13.06	15.95	17.33
Utah	13.31	15.91	17.30
Vermont	32.16	39.60	44.35
Virginia	22.66	26.68	32.10
Washington	17.81	23.55	29.50
West Virginia	19.64	19.96	21.71
Wisconsin	22.44	26.66	27.62
Wyoming	23.13	27.92	30.52

[1]1981 data not comparable with 1983 and 1985 data.

SOURCE: National Institute of Mental Health: R. W. Manderscheid and S. A. Barrett: *Mental Health, United States, 1987*. DHHS Pub. No. (ADM) 87-1518. U.S. Government Printing Office, 1987.

Appendix Contents

I. Sources and Limitations of Data

Introduction 185

Department of Health and Human Services
Public Health Service
Centers for Disease Control
National Center for Health Statistics
National Vital Statistics System 185
National Survey of Family Growth 186
National Health Interview Survey 186
National Health Examination Survey 187
National Health and Nutrition Examination Survey 187
National Master Facility Inventory 188
National Hospital Discharge Survey 188
National Nursing Home Survey 189
National Ambulatory Medical Care Survey 190

Center for Infectious Diseases
AIDS Surveillance 190

Epidemiology Program Office
National Notifiable Diseases Surveillance System 190

Center for Chronic Disease Prevention and Health Promotion
Abortion Surveillance 191

Center for Prevention Services
U.S. Immunization Survey 191

National Institute for Occupational Safety and Health
National Occupational Hazard Survey 191
National Occupational Exposure Survey 191

Health Resources and Services Administration
Bureau of Health Professions
Physician Supply Projections 191
Nurse Supply Estimates 192

Alcohol, Drug Abuse, and Mental Health Administration
National Institute on Alcohol Abuse and Alcoholism
National Survey of Drinking 192

National Institute on Drug Abuse
National Household Surveys on Drug Abuse 192

National Institute of Mental Health
Surveys of Mental Health Organizations 192

National Institutes of Health
National Cancer Institute
Surveillance, Epidemiology, and End Results Program 193

Health Care Financing Administration
Office of the Actuary
Estimates of National Health Expenditures 193
Medicare Statistical System 194
Medicaid Data System 194

Department of Commerce
Bureau of the Census
U.S. Census of Population 194
Current Population Survey 194
Population Estimates 194

Department of Labor
Bureau of Labor Statistics
Consumer Price Index 195
Employment and Earnings 195

Environmental Protection Agency
National Aerometric Surveillance Network 195

United Nations
Demographic Yearbook 195

Alan Guttmacher Institute
Abortion Survey 196

American Hospital Association
Annual Survey of Hospitals 196

American Medical Association
Physician Masterfile 196
Annual Census of Hospitals 196

Interstudy
National Health Maintenance Organization Census 196

Public Health Foundation
Association of State and Territorial Health Officials Reporting System 197

II. Glossary

General Terms 199
Social and Demographic Terms 199
Geographic Terms 200
Health Status and Determinants 201
Fertility 201
Mortality 201
Determinants and Measures of Health 202
Utilization and Resources 203
Ambulatory Care 203
Inpatient Care 203
Psychiatric Care 206
Personnel 206
Health Expenditures 207

best copy available

Appendix I Sources and Limitations of Data

Introduction

This report consolidates the most current data on the health of the population of the United States, the availability and use of health resources, and health care expenditures. The information was obtained from the data files and/or published reports of many governmental and nongovernmental agencies and organizations. In each case, the sponsoring agency or organization collected data using its own methods and procedures. Therefore, the data in this report vary considerably with respect to source, method of collection, definitions, and reference period.

Generally, the data presented in the detailed tables are from the ongoing data collection systems of the National Center for Health Statistics. However, health care personnel data come primarily from the Bureau of Health Professions, Health Resources and Services Administration, and the American Medical Association. National health expenditures data were compiled by the Bureau of Data Management and Strategy, Health Care Financing Administration.

Although a detailed description and comprehensive evaluation of each data source is beyond the scope of this appendix, users should be aware of the general strengths and weaknesses of the different data collection systems. For example, population-based surveys obtain socioeconomic data, data on family characteristics, and information on the impact of an illness, such as days lost from work or limitation of activity. They are limited by the amount of information a respondent remembers or is willing to report. Detailed medical information, such as precise diagnoses or the types of operations performed, may not be known and so will not be reported. Conversely, health care providers, such as physicians and hospitals, usually have good diagnostic information but little or no information about the socioeconomic characteristics of individuals or the impact of illnesses on individuals.

The population covered by different data collection systems may not be the same, and understanding the differences is critical to interpreting the data. Data on vital statistics and national expenditures cover the entire population. Most data on morbidity and utilization of health resources cover only the civilian noninstitutionalized population. Thus, statistics are not included for military personnel, who are usually young; for institutionalized people, who may be any age; or for nursing home residents, who are usually old.

All data collection systems are subject to error, and records may be incomplete or contain inaccurate information. People may not remember essential information, a question may not mean the same thing to different respondents, and some institutions or individuals may not respond at all. It is not always possible to measure the magnitude of these errors or their impact on the data. Where possible, the tables have notes describing the universe and the method of data collection to enable the user to place his or her own evaluation on the data. In many instances, data do not add to totals because of rounding.

Overall estimates generally have relatively small sampling errors, but estimates for certain population subgroups may be based on small numbers and have relatively large sampling errors. Numbers of births and deaths from the vital statistics system represent complete counts (except for births in those States where data are based on a 50-percent sample). Therefore, they are not subject to sampling error. However, when the figures are used for analytical purposes, such as the comparison of rates over a time period, the number of events that actually occurred may be considered as one of a large series of possible results that could have arisen under the same circumstances. When the number of events is small and the probability of such an event is small, considerable caution must be observed in interpreting the conditions described by the figures. Estimates that are unreliable because of large sampling errors or small numbers of events have been noted with asterisks in selected tables. The criteria used to designate unreliable estimates are indicated as notes to the applicable tables.

The descriptive summaries that follow provide a general overview of study design, methods of data collection, and reliability and validity of the data. More complete and detailed discussions are found in the publications referenced at the end of each summary. The data set or source is listed under the agency or organization that sponsored the data collection.

Department of Health and Human Services

Public Health Service

Centers for Disease Control

National Center for Health Statistics

National Vital Statistics System

Through the National Vital Statistics System, the National Center for Health Statistics (NCHS) collects and publishes data on births, deaths, marriages, and divorces in the United States. Fetal deaths are classified and tabulated separately from other deaths. The Division of Vital Statistics obtains information on births and deaths from the registration offices of all States, New York City, the District of Columbia, Puerto Rico, the U.S. Virgin Islands, and Guam. Geographic coverage for births and deaths has been complete since 1933.

Until 1972, microfilm copies of all death certificates and a 50-percent sample of birth certificates were received from all registration areas and processed by NCHS. Beginning in 1972, some States began sending their data to NCHS through the Cooperative Health Statistics System (CHSS). States that participated in the CHSS program processed 100 percent of their death and birth records and sent the entire data file to NCHS on computer tape. Currently, the data are sent to NCHS through the Vital Statistics Cooperative Program (VSCP), following the same procedures as the CHSS. The number of participating States grew from 6 in 1972 to 46 in 1984. All 50 States and the District of Columbia participated in the VSCP in 1985.

The standard certificates of birth, death, and fetal death recommended by NCHS are modified in each registration area to serve the area's needs. However, most certificates conform

closely in content and arrangement to the standard certificate, and all certificates contain a minimum data set specified by NCHS.

Information on births of Hispanic parentage was available for 22 States in 1980 and 1981. The 22 States that included items on their birth certificates on the ethnic or Hispanic origin of the mother and father were Arizona, Arkansas, California, Colorado, Florida, Georgia, Hawaii, Illinois, Indiana, Kansas, Maine, Mississippi, Nebraska, Nevada, New Jersey, New Mexico, New York, North Dakota, Ohio, Texas, Utah, and Wyoming. In 1982, these data also became available in Tennessee, and in 1983 the District of Columbia began reporting information on births of Hispanic parentage; so that since 1983 information on births of Hispanic parentage is available for 23 States and the District of Columbia. In 1986, about 90 percent of the total U.S. Hispanic population resided in these States.

In most areas, practically all births and deaths are registered. The most recent test of the completeness of birth registration, conducted on a sample of births from 1964 to 1968, showed that 99.3 percent of all births in the United States during that period were registered. No comparable information is available for deaths, but it is generally believed that death registration in the United States is at least as complete as birth registration. Provisional death rates by cause, age, race, and sex are estimated from the Current Mortality Sample. The Current Mortality Sample is a 10-percent systematic sample of death certificates received each month in the vital statistics offices in the 50 States, the District of Columbia, and the independent registration area of New York City. All death certificates received during the 1-month period are sampled regardless of the month or year in which the death occurred.

For more information, see: National Center for Health Statistics, *Vital Statistics of the United States, 1985*, Vol. I, DHHS Pub. No. (PHS) 88-1113 and Vol. II, Part A, DHHS Pub. No. (PHS) 88-1101, Public Health Service, Washington, U.S. Government Printing Office, 1988.

National Survey of Family Growth

Data from the National Survey of Family Growth (NSFG) are based on a five-stage area probability sample of civilian noninstitutionalized women living in the coterminous United States who are 15–44 years of age.

The counties and independent cities of the United States were combined to form a frame of primary sampling units (PSU's), and 101 PSU's were selected as the first-stage sample for Cycle I of NSFG, conducted from June 1973 to February 1974. The next three stages produced a clustered sample of 28,998 households within the 101 PSU's. At 26,028 of these households (89.8 percent), household screener interviews were completed. These screeners produced a fifth-stage sample of 10,879 women of whom 9,797 were interviewed. Never-married women (except those with offspring in the household) were not included in the sample for Cycle I.

Cycle II of NSFG was conducted from January to September 1976. The sample design was basically the same as it was in Cycle I. The sample consisted of 27,162 households in 79 PSU's. Household screener interviews were completed at 25,479 of these households (93.8 percent). Of the 10,202 women in the sample, 8,611 were interviewed. Again, never-married women (except those with offspring in the household) were not included in the sample for Cycle II.

Interviewing for Cycle III of the NSFG was conducted from August 1982 through February 1983. The sample design was similar to that in Cycle II: 31,027 households were selected in 79 PSU's. Household screener interviews were completed in 29,511 households (95.1 percent). Of the 9,964 eligible women identified, 7,969 were interviewed. The sample for Cycle III included black women and women 15–19 years of age at higher rates than other women. Women of all marital statuses were interviewed in Cycle III.

In order to produce estimates for the entire population of eligible women in the United States, data for the interviewed sample women were inflated by the reciprocal of the probability of selection at each stage of sampling and adjusted for both screener and interview nonresponse. In Cycles I and II estimates for ever-married women were poststratified to benchmark population values for 12 age-race categories based on data from the Current Population Survey of the U.S. Bureau of the Census. In Cycle III, the poststratification was done within categories of age, race, and marital status.

Quality control procedures for interviewer selection, interviewer training, field listing, and data processing were built into the NSFG to minimize nonsampling error and bias. In addition, the nonresponse adjustments in the estimator were designed to minimize the effect of nonresponse bias by assigning to nonrespondents the characteristics of similar respondents. Sampling errors for NSFG were estimated by balanced half-sample replication.

Discussion of the balanced half-sample technique, summary sampling error charts, and detailed information on the NSFG sample design are available in the following reports: National Center for Health Statistics, D. K. French: National Survey of Family Growth, Cycle I, sample design, estimation procedures, and variance estimation. *Vital and Health Statistics*. Series 2, No. 76. DHEW Pub. No. (PHS) 78-1350. Public Health Service. Washington. U.S. Government Printing Office, Jan. 1979; National Center for Health Statistics, W. R. Grady: National Survey of Family Growth, Cycle II: sample design, estimation procedures, and variance estimation. *Vital and Health Statistics*. Series 2, No. 87. DHHS Pub. No. (PHS) 81-1361. Public Health Service. Washington. U.S. Government Printing Office, Feb. 1981; and National Center for Health Statistics, C. Bachrach, M. Horn, W. Mosher, and I. Shimizu: National Survey of Family Growth, Cycle III: Estimation procedures, weighting, and variance estimation. *Vital and Health Statistics*. Series 2, No. 98. DHHS Pub. No. (PHS) 85-1372. Public Health Service. Washington. U.S. Government Printing Office, Sept. 1985.

National Health Interview Survey

The National Health Interview Survey (NHIS) is a continuing nationwide sample survey in which data are collected through personal household interviews. Information is obtained on personal and demographic characteristics, illnesses, injuries, impairments, chronic conditions, utilization of health resources, and other health topics. The household questionnaire is reviewed each year, with special health topics being added or deleted. For

most health topics, data are collected over an entire calendar year.

The sample design plan of the NHIS follows a multistage probability design that permits a continuous sampling of the civilian noninstitutionalized population residing in the United States. The survey is designed in such a way that the sample scheduled for each week is representative of the target population and the weekly samples are additive over time. The response rate for the survey has been between 95 and 98 percent over the years.

In 1985, the NHIS adopted several new sample design features although, conceptually, the sampling plan remained the same as the previous design. Two major changes included reducing the number of primary sampling locations from 376 to 198 for sampling efficiency and oversampling the black population to improve the precision of the statistics.

The sample was designed so that a typical NHIS sample for the data collection years 1985–94 will consist of approximately 7,500 segments containing about 59,000 assigned households. Of these households, an expected 10,000 will be vacant, demolished, or occupied by persons not in the target population of the survey. The expected sample of 49,000 occupied households will yield a probability sample of about 127,000 persons. In 1986, there was a reduced sample of about 62,000 persons. In 1987, a full sample was used consisting of about 123,000 persons.

A description of the survey design, the methods used in estimation, and general qualifications of the data obtained from the survey are presented in: National Center for Health Statistics, D. A. Dawson and P. F. Adams: Current estimates from the National Health Interview Survey, United States, 1986. *Vital and Health Statistics*. Series 10, No. 164. DHHS Pub. No. (PHS) 86–1592. Public Health Service. Washington. U.S. Government Printing Office, Oct. 1987.

National Health Examination Survey

The National Health Examination Survey (NHES) is a continuing nationwide sample survey conducted by the National Center for Health Statistics in which data for determining the health status of the population are collected through direct standardized physical examinations, clinical and laboratory tests, and measurements. The content of the NHES program is revised periodically, and selected components are added or deleted to meet the current needs for health data of this type.

For the first program or cycle of the National Health Examination Survey (NHES I), 1960–62, data were collected on the total prevalence of certain chronic diseases as well as the distributions of various physical and physiological measures, including blood pressure and serum cholesterol levels. For that program, a highly stratified, multistage probability sample of 7,710 adults, of whom 86.5 percent were examined, was selected to represent the 111 million civilian noninstitutionalized adults 18–79 years of age in the United States at that time. The sample areas consisted of 42 primary sampling units from the 1,900 geographic units. In 1971, a nutrition surveillance component was added and the survey name was changed to the National Health and Nutrition Examination Survey.

For more information on NHES I, see: National Center for Health Statistics: Cycle I of the National Health Examination Survey, sample and response, United States, 1960–62. T. Gordon and H. W. Miller. *Vital and Health Statistics*. Series 11, No. 1. PHS Pub. No. 1000. Public Health Service. Washington. U.S. Government Printing Office, May 1964.

National Health and Nutrition Examination Survey

Through this survey, health-related data are obtained by means of direct physical examinations, clinical and laboratory tests, and related measurement procedures. In the first National Health and Nutrition Examination Survey (NHANES I), conducted from 1971 through 1974, a major purpose was to measure and monitor indicators of the nutritional status of the American people through dietary intake data, biochemical tests, physical measurements, and clinical assessments for evidence of nutritional deficiency. Detailed examinations were given by dentists, ophthalmologists, and dermatologists with an assessment of need for treatment. In addition, data were obtained for a subsample of adults on overall health care needs and behavior, and more detailed examination data were collected on cardiovascular, respiratory, arthritic, and hearing conditions.

The NHANES I target population was the civilian noninstitutionalized population 1–74 years of age residing in the coterminous United States, except for people residing on any of the reservation lands set aside for the use of American Indians. The sample design was a multistage, stratified probability sample of clusters of persons in land-based segments. The sample areas consisted of 65 primary sampling units (PSU's) selected from the 1,900 PSU's in the coterminous United States. A subsample of persons 25–74 years of age was selected to receive the more detailed health examination. Groups at high risk of malnutrition were oversampled at known rates throughout the process.

Household interviews were completed for more than 96 percent of the 28,043 persons selected for the NHANES I sample, and about 75 percent (20,749) were examined.

For NHANES II, conducted from 1976 through 1980, the nutrition component remained nearly identical to that fielded for NHANES I. In the medical area, primary emphasis was placed on diabetes, kidney and liver functions, allergy, and speech pathology.

The NHANES II target population was the civilian noninstitutionalized population 6 months–74 years of age residing in the United States, including Alaska and Hawaii. NHANES II utilized a multistage probability design that involved selection of PSU's, segments (clusters of households) within PSU's, households, eligible persons, and finally sample persons. The sample design provided for oversampling among those persons 6 months–5 years of age, those 60–74 years of age, and those living in poverty areas.

A sample of 27,801 persons was selected for NHANES II. Of this sample, 20,322 (73.1 percent) were examined.

The estimation procedure used to produce national statistics for NHANES I and NHANES II involved inflation by the reciprocal of the probability of selection, adjustment for nonresponse, and poststratified ratio adjustment to population totals. Sampling errors also were estimated to measure the reliability of the statistics.

For more information on NHANES I, see: National Center for

Health Statistics, H. W. Miller: Plan and operation of the National Health and Nutrition Examination Survey, United States, 1971–73. *Vital and Health Statistics*. Series 1, Nos. 10a and 10b. DHEW Pub. No. (HSM) 73-1310. Health Services and Mental Health Administration. Washington. U.S. Government Printing Office, Feb. 1973; and National Center for Health Statistics, A. Engel, R. S. Murphy, K. Maurer, and E. Collins: Plan and operation of the NHANES I Augmentation Survey of Adults 25–74 Years, United States, 1974–75. *Vital and Health Statistics*. Series 1, No. 14. DHEW Pub. No. (PHS) 78-1314. Public Health Service. Washington. U.S. Government Printing Office, June 1978.

For more information on NHANES II, see: National Center for Health Statistics, A. McDowell, A. Engel, J. T. Massey, and K. Maurer: Plan and operation of the Second National Health and Nutrition Examination Survey, 1976–80. *Vital and Health Statistics*. Series 1, No. 15. DHHS Pub. No. (PHS) 81-1317. Public Health Service. Washington. U.S. Government Printing Office, July 1981. For information on nutritional applications of these surveys, see: Yetley, E., and C. Johnson, 1987. Nutritional applications of the Health and Nutrition Examination Surveys (HANES). *Ann Rev Nutr* 7:441–63.

National Master Facility Inventory

The National Master Facility Inventory (NMFI) is a comprehensive file of inpatient health facilities in the United States. The three broad categories of facilities in NMFI are hospitals, nursing and related care homes, and other custodial or remedial care facilities. To be included in NMFI, hospitals must have at least six inpatient beds; nursing and related care homes and other facilities must have at least three inpatient beds.

NMFI is kept current by the periodic addition of names and addresses obtained from State licensing and other agencies for all newly established inpatient facilities. In addition, annual surveys of hospitals and periodic surveys of nursing homes and other facilities are conducted to update name and location, type of business, number of beds, and number of residents or patients in the facilities, and to identify those facilities that have gone out of business.

From 1968 through 1975, the hospital survey was conducted in conjunction with the American Hospital Association (AHA) Annual Survey of Hospitals. AHA performed the data collection for its member hospitals, while the National Center for Health Statistics (NCHS) collected the data for the approximately 400 non-AHA registered hospitals. Since 1976, however, all of the data collection has been performed by AHA.

Hospitals are requested to report data for the full year ending September 30. More than half of the responding hospitals used this reporting period for the 1982 survey. The remaining hospitals used various other reporting periods. The response rate for the 1982 hospital survey was about 90 percent and 96 percent for the 1986 survey.

The nursing home and other facilities survey was conducted by NCHS in 1963, 1967, 1969, 1971, 1973, 1976, 1978, 1980, 1982, and 1986. In the 1980 and 1982 NMFI surveys, only nursing and related care homes were covered. In 1986, nursing and related care homes and facilities for the mentally retarded were covered and called the Inventory of Long-Term Care Places. In 1982, arrangements were made with 35 States for obtaining their data on nursing and related care homes. NCHS surveyed certain types of homes that were excluded from the State surveys.

Statistics derived from the hospital and nursing home and other facilities surveys were adjusted for both facility and item nonresponse. Missing items on the questionnaire were imputed, when possible, by using information reported by the same facility in a previous survey. When data were not available from a previous census for a responding facility, the data were imputed by using data from similar responding facilities. Similar facilities are defined as those with the same types of business, ownership, service, and approximately the same bed size.

For more detailed information on NMFI, see: National Center for Health Statistics, D. A. Roper: Nursing and related care homes as reported from the 1982 NMFI survey. *Vital and Health Statistics*. Series 14, No. 32. DHHS Pub. No. (PHS) 86-1827. Public Health Service. Washington. U.S. Government Printing Office, Sept. 1986; and National Center for Health Statistics, A. Sirrocco. The 1986 Inventory of Long-Term Care Places: An overview of facilities for the mentally retarded. *Advance Data From Vital and Health Statistics*. No. 143. DHHS Pub. No. (PHS) 87-1250. Public Health Service. Hyattsville, Md., 1987.

National Hospital Discharge Survey

The National Hospital Discharge Survey (NHDS) is a continuing nationwide sample survey of short-stay hospitals in the United States. The scope of NHDS encompasses patients discharged from noninstitutional hospitals, exclusive of military and Veterans Administration hospitals, located in the 50 States and the District of Columbia. Only hospitals having six or more beds for patient use and those in which the average length of stay for all patients is less than 30 days are included in the survey. Although all discharges of patients from these hospitals are within the scope of the survey, discharges of newborn infants from all hospitals are excluded from this report as well as discharges of all patients from Federal hospitals.

The sample was selected from a frame of short-stay hospitals listed in the National Master Facility Inventory. A two-stage stratified sample design was used, and hospitals were stratified according to bed size and geographic region. The largest hospitals were selected with certainty in the sample, and the probability of selection of a hospital decreased as the bed size of the hospital decreased. Within each sample hospital, a systematic random sample of discharges was selected from the daily listing sheet. The within-hospital sampling ratio for selecting discharges varied inversely with the probability of selection of the hospital, so that the overall probability of selecting a discharge was approximately the same in each bed size class.

In 1985, for the first time, two data collection procedures were used for the survey. The first was the traditional manual system of sample selection and data abstraction. In the manual system, sample selection and transcription of information from the hospital records to abstract forms were performed by either the hospital staff

or representatives of the National Center for Health Statistics (NCHS) or both. The second was an automated method, used in approximately 17 percent of the sample hospitals in 1985 and 19 percent in 1986, involving the purchase of data tapes from commercial abstracting services. For hospitals using the automated system, tapes containing machine-readable medical record data were purchased from commercial abstracting services. Upon receipt of these tapes they were subject to NCHS sampling, editing, and weighting procedures.

The basic unit of estimation for NHDS was the sample patient abstract. The estimation procedure involved inflation by the reciprocal of the probability of selection, adjustment for nonresponding hospitals and missing abstracts, and ratio adjustments to fixed totals. Of the 558 hospitals selected for the survey, 493 were within the scope of the survey, and 418 participated in the survey in 1986. Data were abstracted from about 193,000 medical records.

For more detailed information on the design of NHDS and the magnitude of sampling errors associated with NHDS estimates, see: National Center for Health Statistics, E. J. Graves: Utilization of short-stay hospitals, United States, 1986, Annual summary. *Vital and Health Statistics*. Series 13, No. 96. DHHS Pub. No. (PHS) 88-1757. Public Health Service. Washington. U.S. Government Printing Office, June 1988; and National Center for Health Statistics. 1987 Summary: National Hospital Discharge Survey. *Advance Data From Vital and Health Statistics*. No. 159 (Rev). DHHS Pub. No. (PHS) 88-1250. Public Health Service. Hyattsville, Md., 1988.

National Nursing Home Survey

The National Center for Health Statistics (NCHS) has conducted three National Nursing Home Surveys. The first survey was conducted from August 1973 through April 1974; the second survey from May through December 1977; and the third from August 1985 through January 1986.

Much of the background information and experience used to develop the first National Nursing Home Survey was obtained from a series of three ad hoc sample surveys of nursing and personal care homes called the Resident Places Surveys (RPS-1, -2, -3). The three surveys were conduced by the National Center for Health Statistics during April-June 1963, May-June 1964, and June-August 1969, respectively. During the first survey, RPS-1, data were collected on nursing homes, chronic disease and geriatric hospitals, nursing home units, and chronic disease wards of general and mental hospitals. RPS-2 concentrated mainly on nursing homes and geriatric hospitals. During the third survey, RPS-3, nursing and personal care homes in the coterminous United States were sampled.

For the initial National Nursing Home Survey (NNHS) conducted in 1973-74, the universe included only those nursing homes that provided some level of nursing care. Thus, homes providing only personal or domiciliary care were excluded. The sample of 2,118 homes was selected from the 17,685 homes that provided some level of nursing care and were listed in the 1971 National Master Facility Inventory (NMFI) or those that opened for business in 1972. Data were obtained from about 20,600 staff and 19,000 residents. Response rates were 97 percent for facilities, 88 percent for expenditures, 98 percent for residents, and 82 percent for staff.

The scope of the 1977 NNHS encompassed all types of nursing homes, including personal care and domiciliary care homes. The sample of about 1,700 facilities was selected from 23,105 nursing homes in the sampling frame, which consisted of all homes listed in the 1973 NMFI and those opening for business between 1973 and December 1976. Data were obtained from about 13,600 staff, 7,000 residents, and 5,100 discharged residents. Response rates were 95 percent for facilities, 85 percent for expenses, 81 percent for staff, 99 percent for residents, and 97 percent for discharges.

The scope of the 1985 NNHS was similar to the 1977 survey in that it included all types of nursing homes. The sample of 1,220 homes was selected from a sampling frame of 20,479 nursing and related care homes. The frame consisted of all homes in the 1982 NMFI; homes identified in the 1982 Complement Survey of the NMFI as "missing" from the 1982 NMFI; facilities that opened for business between 1982 and June 1984; and hospital-based nursing homes obtained from the Health Care Financing Administration. Information on the facility was collected through a personal interview with the administrator. Accountants were asked to either complete a questionnaire on expenditures or provide a financial statement. Resident data were provided by a nurse familiar with the care provided to the resident. The nurse relied on the medical record and personal knowledge of the resident. In addition to employee data that were collected during the interview with the administrator, a sample of registered nurses completed a self-administered questionnaire. Discharge data were based on information recorded in the medical record. Additional data about the current and discharged residents were obtained in telephone interviews with next of kin. Data were obtained from 1,079 facilities, 2,763 registered nurses, 5,243 current residents, and 6,023 discharges. Response rates were 93 percent for facilities, 68 percent for expenses, 80 percent for registered nurses, 97 percent for residents, 95 percent for discharges, and 88 percent for next of kin.

Statistics for all three surveys were derived by a ratio-estimation procedure. Statistics were adjusted for failure of a home to respond, failure to fill out one of the questionnaires, and failure to complete an item on a questionnaire.

For more information on the 1973-74 NNHS, see: National Center for Health Statistics, M. R. Meiners: Selected operating and financial characteristics of nursing homes, United States, 1973-74 National Nursing Home Survey. *Vital and Health Statistics*. Series 13, No. 22. DHEW Pub. No. (HRA) 76-1773. Health Resources Administration. Washington. U.S. Government Printing Office, Dec. 1975. For more information on the 1977 NNHS, see: National Center for Health Statistics, J. F. Van Nostrand, A. Zappolo, E. Hing, et al.: The National Nursing Home Survey, 1977 Summary for the United States. *Vital and Health Statistics*. Series 13, No. 43. DHHS Pub. No. (PHS) 79-1794. Public Health Service. Washington. U.S. Government Printing Office, July 1979. For more information on the 1985 NNHS, see: National Center for Health Statistics, G. Strahan. Nursing home characteristics, preliminary data from the 1985 National Nursing Home Survey. *Advance Data*

From Vital and Health Statistics. No. 131, DHHS Pub. No. (PHS) 87-1250. Public Health Service. Hyattsville, Md. 1987; National Center for Health Statistics, E. Hing. Use of nursing homes by the elderly: Preliminary data from the 1985 National Nursing Home Survey. *Advance Data From Vital and Health Statistics*. No. 135, DHHS Pub. No. (PHS) 87-1250. Public Health Service. Hyattsville, Md. 1987.

National Ambulatory Medical Care Survey

The National Ambulatory Medical Care Survey (NAMCS) is a continuing national probability sample of ambulatory medical encounters. The scope of the survey covers physician-patient encounters in the offices of nonfederally employed physicians classified by the American Medical Association or American Osteopathic Association as "office-based, patient care" physicians. Excluded are visits to hospital-based physicians, visits to specialists in anesthesiology, pathology, and radiology and visits to physicians who are principally engaged in teaching, research, or administration. Telephone contacts and nonoffice visits are also excluded.

A multistage probability design is employed. The first-stage sample consists of 87 primary sampling units (PSU's) selected from about 1,900 such units into which the United States has been divided. In each sample PSU, a sample of practicing physicians is selected. The final stage involves selection within a randomly assigned 7-day reporting period, and the selection of samples of patient visits during that period.

For the 1985 survey, a sample of 5,032 non-Federal, office-based physicians was selected from masterfiles maintained by the American Medical Association and the American Osteopathic Association. The physician response rate for 1985 was 70.2 percent, providing data concerning a random sample of about 71,594 patient visits.

The estimation procedure used in NAMCS basically has three components: inflation by the reciprocal of the probability of selection, adjustment for nonresponse, and ratio adjustment to fixed totals.

For more detailed information on the design of NAMCS and the magnitude of sampling errors associated with NAMCS estimates, see: National Center for Health Statistics, T. McLemore and J. DeLozier. 1985 Summary: National Ambulatory Medical Care Survey. *Advance Data From Vital and Health Statistics*. No. 128. DHHS Pub. No. (PHS) 87-1250. Public Health Service. Hyattsville, Md., 1987.

Center for Infectious Diseases

AIDS Surveillance

Acquired immunodeficiency syndrome (AIDS) surveillance is conducted by health departments in each State, territory, and the District of Columbia. Although surveillance activities range from passive to active, most areas employ multifaceted active surveillance programs, which include four major reporting sources of AIDS information: hospitals and hospital-based physicians, physicians in nonhospital practice, public and private clinics, and medical record systems (death certificates, tumor registries, hospital discharge abstracts, and communicable disease reports). Using a standard confidential case report form, the health departments collect information without personal identifiers, which is coded and computerized either at the Centers for Disease Control (CDC) or at health departments from which it is then transmitted electronically to CDC.

AIDS surveillance data are used to detect epidemiologic trends, to identify unusual cases requiring follow up, and for publication in the *AIDS Weekly Surveillance Report*. Studies to determine the completeness of reporting of AIDS cases meeting the national surveillance definition suggest reporting at greater than or equal to 90 percent.

For more information on AIDS surveillance, contact: Chief, Surveillance Section, Surveillance and Evaluation Branch, AIDS Program, Center for Infectious Diseases, Centers for Disease Control, Atlanta, Ga. 30333.

Epidemiology Program Office

National Notifiable Diseases Surveillance System

The Epidemiology Program Office (EPO) of the Centers for Disease Control (CDC), in partnership with the Council of State and Territorial Epidemiologists (CSTE), operates the National Notifiable Diseases Surveillance System. The purpose of this system is primarily to provide weekly provisional information on the occurrence of diseases defined as notifiable by CSTE. In addition, the system also provides summary data on an annual basis. State epidemiologists report cases of notifiable diseases to EPO, and EPO tabulates and publishes these data in the *Morbidity and Mortality Weekly Report (MMWR)* and the *Summary of Notifiable Diseases, United States* (entitled *Annual Summary* before 1985). Notifiable disease surveillance is used by public health practitioners at local, State, and national levels as part of disease prevention and control activities.

Notifiable disease reports are received from 52 areas in the United States and 5 territories. To calculate U.S. rates, data reported by 50 States, New York City, and Washington, D.C., are used. (New York State is reported as Upstate New York, which excludes New York City).

Completeness of reporting varies because not all cases receive medical care and not all treated conditions are reported. Although State laws and regulations mandate disease reporting, reporting to CDC by States and territories is voluntary. Reporting of varicella (chickenpox) and mumps to CDC is not done by some States in which these diseases are not notifiable to local or State authorities. The number of areas reporting varicella was 31 in 1985, 32 in 1986, and 33 in 1987. The number of areas reporting mumps was 48 in 1985 and 1986 and 49 in 1987.

Estimates of underreporting of some diseases have been made. For example, it is estimated that only 10 percent of cases of congenital rubella syndrome are reported. Only 10-15 percent of all measles cases were reported prior to the institution of the Measles Elimination Program in 1978; but now it is estimated that all cases are reported in most areas of the country. Data from a study of tetanus deaths suggest that only 40 percent of tetanus cases are reported to CDC.

For more information, see: Centers for Disease Control, Final 1987 reports of notifiable diseases, *Morbidity and Mortality Weekly Report*, 36(54), Public Health Service, DHHS, Atlanta, Ga., Sept. 1988; or write to Centers for Disease Control, Director, Division of Surveillance and Epidemiologic Studies, Epidemiology Program Office, Atlanta, Ga. 30333.

Center for Chronic Disease Prevention and Health Promotion

Abortion Surveillance

The Centers for Disease Control (CDC) acquires abortion service statistics by State of occurrence from three sources—central health agencies, hospitals and other medical facilities, and the National Center for Health Statistics. Most of the central health agencies have established direct reporting systems, although a few collected data by surveying abortion facilities. Epidemiologic surveillance of abortion was initiated in eight States in 1969, and now statewide abortion data are also reported by the remaining States.

The total number of abortions reported to CDC is about 16 percent less than the total estimated independently by the Alan Guttmacher Institute, the research and development division of the Planned Parenthood Federation of America, Inc.

For more information, contact: Director, Division of Reproductive Health, Center for Health Promotion and Education, Centers for Disease Control, Atlanta, Ga. 30333.

Center for Prevention Services

U.S. Immunization Survey

This system is the result of a contractual agreement between the Centers for Disease Control and the U.S. Bureau of the Census. Estimates from the Immunization Survey are based on data obtained during the third week of each September for a subsample of households interviewed for the Current Population Survey, which is described separately in this appendix.

The reporting system contains demographic variables and vaccine history along with disease history when relevant to vaccine history. The system is used to estimate the immunization level of the Nation's child population against the vaccine-preventable diseases; from time to time, immunization level data on the adult population are collected.

The scope of the U.S. Immunization Survey covers the 50 States and the District of Columbia. For example, the 1981 sample included approximately 45,000 household units. Six thousand sample units were found to be vacant or otherwise not to be interviewed. Of the approximately 39,000 occupied households eligible for interview, about 1,500 were not interviewed because the occupants either were not at home after repeated calls or were unavailable for some other reason.

The estimating procedure that was used involves the inflation of weighted sample results to independent estimates of the civilian noninstitutionalized population of the United States by age and race.

Starting in 1979, the questionnaire was modified to solicit information regarding the source of immunization responses given by the interviewee. This change was made to measure the percent of responses for which a family immunization record was the source of the information.

For more information about the survey methodology, contact: Director, Division of Immunization, Center for Preventive Services, Centers for Disease Control, Atlanta, Ga. 30333.

National Institute for Occupational Safety and Health

National Occupational Hazard Survey

The National Occupational Hazard Survey (NOHS) was conducted by the National Institute for Occupational Safety and Health (NIOSH) to obtain data on employee exposure to particular chemicals and physical agents in various industries.

A random sample of 4,636 urban workplaces was selected by the U.S. Department of Labor, Bureau of Labor Statistics. Because mining and government activities are not within the coverage of the Occupational Safety and Health Act and agricultural and rural areas were beyond the logistical capacity of the survey, the sample excluded those types of facilities. Included were facilities in 66 different two-digit Standard Industrial Classifications (SIC's), located in 67 standard metropolitan statistical areas. Field work was performed by 20 industrial hygiene surveyors who collected data from February 1972 through June 1974.

Information in Part I, elicited during a questionnaire interview of management, profiled the SIC and size of facility, along with its medical, safety, and industrial hygiene programs. Part II, the greatest part of the NOHS data, contained the recorded observations of the surveyor's management-escorted "walk-through" of all facility work areas. Part II listed, by job title, the number of employees who were potentially exposed to the same chemicals and physical agents. The surveyor recorded all materials and physical agents each employee group encountered, regardless of toxicity; hazardous nature; conditions of use; and the presence, absence, or effectiveness of any exposure control measures. For each potential exposure listed within an occupational group, the surveyor also recorded the duration, intensity, form, and the control utilized and whether it functioned.

For more information on NOHS, see: National Institute for Occupational Safety and Health, National Occupational Hazard Survey, Vol. I, Survey manual, DHEW Pub. No. (NIOSH) 74-127; Vol. II, Data editing and data base development, DHEW Pub. No. (NIOSH) 77-213; Vol. III, Survey analysis and supplemental tables, DHEW Pub. No. (NIOSH) 78-114.

National Occupational Exposure Survey

Beginning in 1981, NIOSH began a second national survey of worksites, patterned after the NOHS. This second survey, known as the National Occupational Exposure Survey (NOES), collected information essentially identical to the NOHS in a sample of 4,490 facilities over a 30-month period.

For further information on NOES, see: National Institute for Occupational Safety and Health, National Occupational Exposure Survey, Field Guidelines, DHHS Pub. No. (NIOSH) 86-116.

Health Resources and Services Administration

Bureau of Health Professions

Physician Supply Projections

Physician supply projections in this report are based on a model developed by the Bureau of Health Professions to forecast the supply of physicians by specialty and by State of practice. The 1981 supply of active physicians (M.D.'s) was used as the starting point for the most recent projections of active physicians. The major source of data used to obtain 1981

figures was the American Medical Association (AMA) Physician Masterfile.

In the first stage of the projections, graduates from U.S. schools of allopathic (M.D.) and osteopathic (D.O.) medicine and foreign-trained additions were estimated on a year-by-year basis. Estimates of first-year enrollments, student attrition, other medical school-related trends, and a model of foreign and Canadian medical graduate immigration were used in deriving these annual additions. These year-by-year additions were then combined with the already existing active supply in a given year to produce a preliminary estimate of the active work force in each succeeding year. These estimates were then reduced using estimates of mortality and retirement. Mortality and retirement losses were computed by 5-year age cohorts on an annual basis, using age distributions and mortality and retirement rates based on AMA data.

For more information, see: Bureau of Health Professions, *Sixth Report to the President and Congress on the Status of Health Personnel in the United States*, DHHS Pub. No. (HRS-P-OD) 88-1, Health Resources and Services Administration, Rockville, Md., 1988.

Nurse Supply Estimates

Nursing estimates in this report are based on a model developed by the Bureau of Health Professions to meet the requirements of Section 951, P.L. 94-63. The model estimates the following for each State:

1. Nurse population—those with current licenses to practice
2. Nurse supply—all practicing nurses either full or part time (or all of those available to practice at that time)
3. Full-time equivalent supply—nurses practicing full time plus one-half of those practicing part time (or available on that basis)

Each of the three estimates are divided into three levels of highest educational preparation: associate degree or diploma; baccalaureate; master's and doctorate.

Among the factors considered are new graduates, changes in educational status, migration patterns, death rates, and licensure phenomena. Data sources include data on nursing education from the National League for Nursing and data on licensure from the National Council of State Boards of Nursing. Data on the number and characteristics of registered nurses are based on data from the National Sample Survey of Registered Nurses conducted by the Division of Nursing, Bureau of Health Professions in November 1984.

Alcohol, Drug Abuse, and Mental Health Administration

National Institute on Alcohol Abuse and Alcoholism

National Survey of Drinking

Data on trends in alcohol consumption were drawn from national surveys funded by the National Institute on Alcohol Abuse and Alcoholism and the National Institute of Drug Abuse. The 1979 survey was based on self-reported consumption and was designed to represent adults 18 years of age and over living in households in the coterminous United States. A total of 1,772 interviews were conducted, representing a response rate of 66 percent.

For more information on the National Survey of Drinking, write: Laboratory for Epidemiology and Population Studies, National Institute on Alcohol Abuse and Alcoholism, 5600 Fishers Lane, Rockville, Md. 2085[illegible]. For further information on alcoho[illegible] services, see: National Institute [illegible]n Alcohol Abuse and Alcoholism, Characteristics of alcoholism services in the United States—1984. Data from the September 1984 National Alcoholism and Drug Abuse Program Inventory. P. G. Reed and D. S. Sanchez. Division of Biometry and Epidemiology. June 1986.

National Institute on Drug Abuse

National Household Surveys on Drug Abuse

Data on trends in use of marijuana, cigarettes, and alcohol among youths 12-17 years of age and young adults 18-25 years of age are from the National Household Survey on Drug Abuse. The 1985 survey is the eighth in a series that began in 1971 under the auspices of the National Commission on Marijuana and Drug Abuse. Since 1974, the survey has been sponsored by the National Institute on Drug Abuse.

The survey covers the population 12 years of age and over living in households in the coterminous United States. Youths (12-17 years) and young adults (18-25 years of age) are oversampled.

The most recent survey (1985) is based on home personal interviews of 8,038 randomly selected Americans 12 years of age and over. The response rate in this survey was 86 percent for the youth sample (12-17 years). In 1985, for the first time blacks and Hispanics were oversampled.

For more information on the National Household Survey on Drug Abuse, see: Population Estimates, 1985. For further information on drug abuse treatment units, see: National Institute on Drug Abuse, *Main Findings for Drug Abuse Treatment Units. Data From the National Drug and Alcoholism Treatment Utilization Survey NDATUS*. DHHS Pub. No. (ADM) 83-1284, U.S. Government Printing Office, 1983.

National Institute of Mental Health

Surveys of Mental Health Organizations

The Survey and Reports Branch of the Division of Biometry and Applied Sciences conducts several inventories of mental health organizations. Some of the data in this report are derived from more than one of these inventories. The response rate to most of the items on these inventories is relatively high (90 percent or better) as is the rate for data presented in this report. However, for some inventory items, the response rate may be somewhat lower.

The Inventories of Mental Health Organizations are the primary source for National Institute of Mental Health (NIMH) data included in this report. This data system is based on questionnaires mailed every other year to mental health organizations in the United States, including psychiatric hospitals, non-Federal general hospitals with psychiatric services, Veterans Administration psychiatric services, residential treatment centers for emotionally disturbed children, freestanding outpatient psychiatric clinics, and other types of partial care organizations. Federally funded community mental health centers (CMHC's) were included separately through 1980. In 1981, with the advent of block grants, the changes in definition of CMHC's,

and the discontinuation of CMHC monitoring by NIMH, organizations formerly classified as CMHC's have been reclassified as other organization types, primarily "multiservice mental health organizations, not elsewhere classified" and "freestanding psychiatric outpatient clinics."

Beginning in 1983 any organization that provides services in any combination of two or more services (e.g., outpatient plus partial care, residential treatment plus outpatient plus partial care) and is neither a hospital nor a residential treatment center for emotionally disturbed children is classified as a multiservice mental health organization. Prior to 1983 an organization had to have either inpatient or residential treatment services in combination with at least one other service to be a "multiservice mental health organization." The result of this definitional change is to increase sharply the number of multiservice mental health organizations while decreasing the number of freestanding psychiatric outpatient clinics.

Other surveys conducted by the Survey and Reports Branch encompass samples of patients admitted to State, county, and private mental hospitals, outpatient psychiatric services, and Veterans Administration psychiatric services. The purpose of these surveys is to determine the sociodemographic, clinical, and treatment characteristics of patients served by these facilities.

For more information, write: Survey and Reports Branch, Division of Biometry and Applied Sciences, National Institute of Mental Health, Room 18C-07, 5600 Fishers Lane, Rockville, Md. 20857. For further information on mental health, see: National Institute of Mental Health, *Mental Health, United States, 1987*. R. W. Manderscheid and S. A. Barrett, eds. DHHS Pub. No. (ADM) 87-1518, U.S. Government Printing Office, 1987.

National Institutes of Health

National Cancer Institute

Surveillance, Epidemiology, and End Results Program

In the Surveillance, Epidemiology, and End Results (SEER) Program the National Cancer Institute (NCI) contracts with 11 population-based registries throughout the United States and Puerto Rico to provide data on all residents diagnosed with cancer during the year and to provide current followup information on all previously diagnosed patients.

Data are submitted to the Institute twice a year. Patients included in this report include those diagnosed between 1973 and 1985. Patients diagnosed between 1973 and 1984 have been followed through 1985 and are included in survival calculations using the actuarial method. All patients were residents of one of the following geographic areas at the time of their initial diagnosis of cancer: Atlanta, Georgia; Detroit, Michigan; Seattle-Puget Sound, Washington; San Francisco-Oakland, California; Connecticut; Iowa; New Mexico; Utah; and Hawaii. Data from New Jersey were excluded because those data are available only since 1979. Further, data from Puerto Rico were also excluded because this analysis focuses on trends occurring within the United States exclusive of its territories.

Population estimates used to calculate incidence rates are obtained from the U.S. Census Bureau. Currently, the Bureau has provided population projections through 1984. Population projections for 1985 have been made by NCI.

Life tables used to determine normal life expectancy when calculating relative survival rates were obtained from the National Center for Health Statistics. Separate life tables are used for each race-specific group included in the SEER Program.

For further information, see: National Cancer Institute, *Annual Cancer Statistics Review, Including Cancer Trends: 1950–1985*, by E. Sondik et al., NIH Pub. No. 88-2789. Public Health Service, Bethesda, Md., Feb. 1987.

Health Care Financing Administration

Office of the Actuary

Estimates of National Health Expenditures

Estimates of public and private expenditures for health (National Health Accounts) are compiled annually by type of expenditure and source of funds. The Health Care Financing Administration occasionally revises its health expenditure estimates. Data in this volume may differ slightly from those appearing in earlier volumes of *Health, United States*. The data for Federal health programs are taken from administrative sources.

Estimates for non-Federal expenditures come from an array of sources. American Hospital Association data on hospital finances are the primary source for estimates relating to hospital care. The salaries of dentists and physicians on the staffs of hospitals and hospital outpatient facilities are considered a component of hospital care. Expenditures for the education and training of medical personnel are considered to be expenditures for education, and where they can be separated, they are excluded from health expenditures. Since 1977 the costs of services of health professionals have been estimated using data from the U.S. Bureau of the Census Services Annual Survey, the Bureau of Labor Statistics and the Consumer Price Index with some adjustments using data from the Medicare program, the Internal Revenue Service, and health maintenance organizations. Expenditures for drugs, drug sundries, eyeglasses, and appliances exclude those provided to inpatients and are obtained principally from the estimate of personal consumption expenditures prepared by the U.S. Department of Commerce's Bureau of Economic Analysis. Nursing home care expenditures by both public and private sources are based on revenue data from the National Nursing Home Survey conducted by the National Center for Health Statistics. Data on the financial expenditures of health insurance organizations come from special Health Care Financing Administration analyses of private health insurers. Expenditures for construction include the erection or renovation of hospitals, nursing homes, medical clinics, and medical research facilities but not for private office buildings providing office space for private practitioners.

For more specific information on items included and excluded and on general methodology used, see: National health expenditures, 1985, by H. Lazenby, K. R. Levit, and D. R. Waldo, *Health Care Financing Notes*, HCFA Pub. No. 03232, Health Care Financing Administration, Washington, U.S. Government Printing Office, Sept. 1986.

Medicare Statistical System

The Medicare Statistical System (MSS) is a byproduct of the administrative recordkeeping system of the Medicare program. This program tracks the eligibility of enrollees and the benefits they use, the certification status of institutional providers, and the payments made for covered services. Currently, records are maintained on about 31 million active enrollees and 26,400 participating institutional providers, and about 240 million bills for services are processed annually.

The basic data files of MSS parallel the major files of Medicare's administrative system. There is an enrollment file containing demographic data including age, sex, race, State, county, and ZIP code of residence, and eligibility information for all enrollees. The institutional provider file contains information on hospitals, skilled nursing facilities, home health agencies, and independent laboratories certified for Medicare participation. The information in this file includes the institution's size, location, and type of control. The third major type of file contains records of services used under Part A of Medicare—hospital, skilled nursing facility, or home health agency services. The last major type of file in MSS provides information on the use of Medicare Part B services, the most important of which is use of physician services. These files include data on the physician's submitted charge, the amount Medicare allowed, Medicare reimbursements, and the number and type of services received.

For further information on MSS and its derivative files, see: Health Care Financing Administration, *Medicare Data System*, by Irving Goldstein, HCFA Pub. No. 03111, Baltimore, Md., July 1981.

Medicaid Data System

The majority of Medicaid data are compiled from forms submitted annually by State Medicaid agencies to the Health Care Financing Administration (HCFA) for Federal fiscal years ending September 30 on the Form HCFA-2082, *Statistical Report on Medical Care: Eligibles, Recipients, Payments, and Services.*

When using the data keep the following caveats in mind:

- Counts of recipients and eligibles categorized by basis of eligibility generally count each person only once—based on the person's basis of eligibility as of first appearance on the Medicaid rolls during the Federal fiscal year covered by the report. Note, however, that some States report duplicated counts of recipients; that is, they report an individual in as many categories as the individual had different eligibility statuses during the year. In such cases, the sum of all basis-of-eligibility cells will be greater than the "total recipients" number.
- Expenditure data include payments for all claims adjudicated or paid during the fiscal year covered by the report. Note that this is not the same as summing payments for services that were rendered during the reporting period.
- Some States fail to submit the HCFA-2082 for a particular year. When this happens, HCFA estimates the current year's HCFA-2082 data for missing States based upon prior year's submissions and information the State entered on Form HCFA-64 (the form States use to claim reimbursement for Federal matching funds for Medicaid).
- HFCA-2082's submitted by States frequently contain obvious errors in one or more cells in the form. For cells obviously in error, HCFA estimates values that appear to be morereasonable.

For further information on Medicaid data, see: *Health Care Financing Program Statistics: Analysis of State Medicaid Program Characteristics, 1986*, by C. Howe and R. Terrell, HCFA Pub. No. 03249, Health Care Financing Administration, Baltimore, Md., U.S. Government Printing Office, Aug. 1987.

Department of Commerce

Bureau of the Census

U.S. Census of Population

The census of population has been taken in the United States every 10 years since 1790. In the 1980 census, data were collected on sex, race, age, and marital status from 100 percent of the enumerated population. More detailed information such as income, education, housing, occupation, and industry were collected from a 20-percent sample. The 20-percent sample was dichotomized by size of place of residence, with 50 percent of households in places of less than 2,500 population and 1 out of 6 households in places of 2,500 or more population receiving the more detailed questionnaire.

For more information on the 1980 census, see: U.S. Bureau of the Census, *1980 Census of Population and Housing, Users Guide*, Part A Text, PHC 80-R1-A.

Current Population Survey

The Current Population Survey (CPS) is a household sample survey of the civilian noninstitutionalized population conducted monthly by the U.S. Bureau of the Census to provide estimates of employment, unemployment, and other characteristics of the general labor force, the population as a whole, and various other subgroups of the population.

A list of housing units from the 1980 census, supplemented by newly constructed units and households known to be missed in the 1980 census, provides the sampling frame in most areas for the present CPS. In some rural locations, current household listings of selected land areas serve as the frame.

The present CPS sample is located in 729 sample areas, with coverage in every State and the District of Columbia. In an average month during 1987, the number of housing units or living quarters eligible for the national sample was about 70,000, of which about 59,500 were interviewed households, and 2,500 were households at which the members were not available for interview. About 11,000 households were visited but were not eligible for interview.

The estimation procedure used involves inflation by the reciprocal of the probability of selection, adjustment for nonresponse, and ratio adjustment.

For more information, see: U.S. Bureau of the Census, *The Current Population Survey, Design and Methodology*, Technical Paper 40, Washington, U.S. Government Printing Office, Jan. 1978.

Population Estimates

National estimates are derived by use of decennial census data as benchmarks and of data available from various agencies as follows: births and

deaths (Public Health Service); immigrants (Immigration and Naturalization Service); the Armed Forces (Department of Defense); net movement between Puerto Rico and the U.S. mainland (Puerto Rico Planning Board); and Federal employees abroad (Office of Personnel Management and Department of Defense). State estimates are based on similar data and also on a variety of data series, including school statistics from State departments of education and parochial school systems.

Current estimates are generally consistent with official decennial census figures and do not reflect the amount of estimated decennial census underenumeration.

For more information, see: U.S. Bureau of the Census, Estimates of the population of the United States, by age, sex, and race: 1980–1987, *Current Population Reports*, Series P–25, No. 1022, Washington, U.S. Government Printing Office, 1988.

Department of Labor

Bureau of Labor Statistics

Consumer Price Index

The Consumer Price Index is a monthly measure of the average change in the prices paid by urban consumers for a fixed market basket of goods and services. The all urban index (CPI–U) introduced in 1978 is representative of the buying habits of about 80 percent of the noninstitutionalized population of the United States.

In calculating the index, price changes for the various items in each location were averaged together with weights that represent their importance in the spending of all urban consumers. Local data were then combined to obtain a U.S. city average.

The index measures price changes from a designated reference date—1967—which equals 100. An increase of 22 percent, for example, is shown as 122. This change can also be expressed in dollars as follows: The price of a base period "market basket" of goods and services bought by all urban consumers has risen from $10 in 1967 to $12.20.

The most recent revision of the CPI, completed in 1987, reflected spending patterns based on the Survey of Consumer Expenditures from 1982 to 1984, the 1980 Census of Population, and the ongoing Point-of-Purchase Survey. Using this improved sample design, prices for the goods and services required to calculate the index are collected in 91 urban areas throughout the country and from about 21,000 retail and service establishments. In addition, data on rents are collected from about 40,000 tenants and 20,000 owner-occupied housing units. Food, fuels, and a few other items are priced monthly in all 91 locations. Prices of most other goods and services are collected bimonthly in the remaining areas. All price information is obtained through visits or calls by trained Bureau of Labor Statistics field representatives.

The 1987 revision changed the treatment of health insurance in the cost-weight definitions for medical care items. This change has no effect on the final index result but provides a clearer picture of the role of health insurance in the CPI. As part of the revision, three new indexes have been created by separating previously combined items, for example, eye care from other professional services, and inpatient and outpatient treatment from other hospital and medical care services.

For more information, see: Bureau of Labor Statistics, *The Consumer Price Index*, BLS Bulletin 2285, U.S. Department of Labor, Washington, April 1978; I. K. Ford and P. Sturm, CPI revision provides more accuracy in the medical care services component, *Monthly Labor Review*, U.S. Department of Labor, Bureau of Labor Statistics, Washington, Apr. 1988.

Employment and Earnings

The Division of Monthly Industry Employment Statistics and the Division of Employment and Unemployment Analysis of the Bureau of Labor Statistics (BLS) publish data on employment and earnings. The data are collected by the Bureau of the Census, State Employment Security Agencies, and State Departments of Labor in cooperation with BLS.

The major data source is the Current Population Survey (CPS), a household interview survey conducted monthly by the Bureau of the Census to collect labor force data for BLS. CPS is described separately in this appendix. Data based on establishment records are also compiled each month from mail questionnaires by BLS, in cooperation with State agencies.

For more information, see: U.S. Department of Labor, Bureau of Labor Statistics, *Employment and Earnings, January 1988*, Vol. 35, No. 1, Washington, U.S. Government Printing Office, Jan. 1988.

Environmental Protection Agency

National Aerometric Surveillance Network

The Environmental Protection Agency (EPA), through extensive monitoring of activities conducted by Federal, State, and local air pollution control agencies, collects data on the six pollutants for which National Ambient Air Quality Standards have been set. These pollution control agencies submit data quarterly to EPA's National Aerometric Data Bank (NADB). There are about 3,400 total stations reporting. Data from some short-term or sporadic monitoring for such purposes as special studies and complaint investigations are usually not included in NADB because the data are not extensive enough to provide equitable comparisons with routine data from permanent monitoring sites.

For more information, see: Environmental Protection Agency, *National Air Pollutant Emission Estimates, 1940–86*, EPA–450/4–87–024, Research Triangle Park, N.C., Jan. 1988, or write to Office of Air Quality Planning and Standards, Environmental Protection Agency, Research Triangle Park, N.C. 27711.

United Nations

Demographic Yearbook

The Statistical Office of the United Nations prepares the *Demographic Yearbook*, a comprehensive collection of international demographic statistics.

Questionnaires are sent annually and monthly to more than 220 national statistical services and other appropriate government offices. Data forwarded on these questionnaires are supplemented, to the extent possible, by data taken from official national publications and by correspondence with the national statistical services. To insure comparability, rates, ratios,

and percentages have been calculated in the Statistical Office of the United Nations.

Lack of international comparability between estimates arises from differences in concepts, definitions, and time of data collection. The comparability of population data is affected by several factors, including (1) the definitions of the total population, (2) the definitions used to classify the population into its urban and rural components, (3) difficulties relating to age reporting, (4) the extent of over- or underenumeration, and (5) the quality of population estimates. The completeness and accuracy of vital statistics data also vary from one country to another. Differences in statistical definitions of vital events may also influence comparability.

For more information, see: United Nations, *Demographic Yearbook 1985*, Pub. No. ST/ESA/STAT/SER.R/15, United Nations, New York, N.Y., 1987.

Alan Guttmacher Institute

Abortion Survey

The Alan Guttmacher Institute (AGI) conducts an annual survey of abortion providers. Data are collected from hospitals, nonhospital clinics, and physicians identified as providers of abortion services. A survey universe of 3,092 hospitals, nonhospital clinics, and individual physicians was compiled. To assess the completeness of the provider and abortion counts, supplemental surveys were conducted of a sample of obstetrician-gynecologists and a sample of hospitals (not in original universe) that were identified as providing abortion services through the American Hospital Association survey.

The number of abortions estimated by AGI is about 20 percent more than the number reported to the Centers for Disease Control.

For more information, write to: The Alan Guttmacher Institute, 111 5th Avenue, 11th Floor, New York, N.Y. 10003–1089.

American Hospital Association

Annual Survey of Hospitals

Data from this survey are based on questionnaires that are sent to all hospitals in the United States and its associated areas accepted for registration by the American Hospital Association (AHA). In 1986, questionnaires were mailed to all hospitals on AHA files. Overall, 6,430 hospitals reported data, a response rate of 91 percent. For nonreporting hospitals and for the survey questionnaires of reporting hospitals on which some information was missing, estimates were made for all data except those on beds, bassinets, and facilities. Data for beds and bassinets of nonreporting hospitals were based on the most recent information available from those hospitals. Facilities and services and inpatient service area data include only reporting hospitals and, therefore, do not include estimates.

Estimates of other types of missing data were based on data reported the previous year, if available. When unavailable, the estimates were based on data furnished by reporting hospitals similar in size, control, major service provided, length of stay, and geographic and demographic characteristics.

Hospitals are requested to report data for the full year ending September 30; 42.4 percent of the responding hospitals used this reporting period. In the 1985 survey, the remaining hospitals used various reporting periods.

For more information on the AHA Annual Survey of Hospitals, see: American Hospital Association, *Hospital Statistics, 1987 Edition, Data from the American Hospital Association 1986 Annual Survey*, Chicago, 1987.

American Medical Association

Physician Masterfile

A masterfile of physicians has been maintained by the American Medical Association (AMA) since 1906. Today, the Physician Masterfile contains data on almost every physician in the United States, both members and nonmembers of AMA, and on those graduates of American medical schools temporarily practicing overseas. The file also includes graduates of foreign medical schools who are in the United States and meet education standards for primary recognition asphysicians.

Masterfile data are obtained from over 2,100 organizations and institutions. These data are collected and processed on an ongoing basis for the maintenance and updating of over 550,000 individual physician records.

A file is initiated on each individual upon entry into medical school or, in the case of foreign graduates, upon entry into the United States. A census of physicians is conducted every 4 years to update the file information on professional activities, specialization, and present employment status. Between censuses, AMA keeps the file current by continuous checks of professional publications and State licensure notices for changes in any physician's activities. When a change is noted, the physician may be sent a questionnaire to verify the change.

For more information on the AMA Physician Masterfile, see: Division of Survey and Data Resources, American Medical Association, *Physician Characteristics and Distribution in the U.S.*, 1987 edition, Chicago, 1987.

Annual Census of Hospitals

From 1920 to 1953, the Council on Medical Education and Hospitals of the American Medical Association (AMA) conducted annual censuses of all hospitals registered by AMA.

In each annual census, questionnaires were sent to hospitals asking for the number of beds, bassinets, births, patients admitted, average census of patients, lists of staff doctors and interns, and other information of importance at the particular time. Response rates were always nearly 100 percent.

The community hospital data from 1940 and 1950 presented in this report were calculated using published figures from the AMA Annual Census of Hospitals. Although the hospital classification scheme used by AMA in published reports is not strictly comparable with the definition of community hospitals, methods were employed to achieve the greatest comparability possible.

For more information on the AMA Annual Census of Hospitals, see: American Medical Association, Hospital service in the United States, *Journal of the American Medical Association*, 116(11):1055–1144, 1941.

Interstudy

National Health Maintenance Organization Census

From 1976 to 1981 the Office of Health Maintenance Organizations

conducted a census of health maintenance organizations (HMO). Since 1982 Interstudy has conducted the census. A questionnaire is sent to all HMO's in the United States asking for updated enrollment, profit status, and Federal qualification status. New HMO's are also asked to provide information on model type. When necessary, information is obtained, supplemented, or clarified by telephone. For nonresponding HMO's State-supplied information or the most current available data is used.

In 1985 a large increase in the number of HMO's and enrollment was partly attributable to a change in the categories of HMO's included in the census: Both Medicaid-only and Medicare-only HMO's have been added. Also component HMO's, which have their own discrete management, can be listed separately; whereas previously the oldest HMO reported for all of its component or expansion sites, even when the components had different operational dates or were different model types.

For further information, see: Interstudy, *National HMO Census: Annual Report on the Growth of HMO's in the U.S., 1982–1986 Editions*; *The InterStudy Edge*, spring 1987 and 1988 editions. Excelsior, Minn., 1983–88.

Public Health Foundation

Association of State and Territorial Health Officials Reporting System

The Association of State and Territorial Health Officials (ASTHO) Reporting System, operated by the Public Health Foundation, is a statistical system that provides comprehensive information about the public health programs of State and local health departments. The Reporting System was established in 1970 by ASTHO in response to congressional requests for information about State health agency uses of block grant funds (i.e., PHS Act, Section 314(d) grant monies). Today, the Reporting System maintains a data base and publishes annual reports on State health agency personnel, expenditures, funding sources, programs, and services.

The Foundation's ASTHO Reporting System conducts an annual survey of the official State health agency (SHA) in each of the 50 States, the District of Columbia, and four U.S. territories. The survey includes extensive detail on the agencies' expenditures and funding sources, and the services and activities in four program areas: personal health, environmental health, health resources, and laboratory. Supplementary data on clients, services, and selected health outcomes are collected in the areas of maternal and child health, handicapped children's services, dental health, and tuberculosis control. In addition, special studies are undertaken periodically to gather information on public health topics of high national priority.

For more information, contact: Public Health Foundation, 1220 L Street, N.W., Suite 350, Washington, D.C. 20005.

Appendix II
Glossary

General Terms

Social and Demographic Terms

Age—Age is reported as age at last birthday, i.e., age in completed years, often calculated by subtracting date of birth from the reference date, with the reference date being the date of the examination, interview, or other contact with an individual.

Age adjustment—Age adjustment, using the direct method, is the application of the age-specific rates in a population of interest to a standardized age distribution in order to eliminate the differences in observed rates that result from age differences in population composition. This adjustment is usually done when comparing two or more populations at one point in time or one population at two or more points in time.

In this report, the death rates are age adjusted to the U.S. population enumerated in 1940. Computations may be simplified by expressing the 1940 U.S. population on a per million basis (table I). Adjustment is based on 11 age groups. An exception is cause-specific provisional death rates, which are based on 10 age groups with 1-4 and 5-14 years of age combined as one group. Maternal mortality rates for complications of pregnancy, childbirth, and the puerperium are calculated as the number of deaths per 100,000 live births. These rates are age adjusted to the live births in the United States in 1970 using the intervals for mother's age in table II.

Table I. Standard million age distribution used to adjust death rates to the U.S. population in 1940

Age	Standard million
All ages	1,000,000
Under 1 year	15,343
1–4 years	64,719
5–14 years	170,355
15–24 years	181,677
25–34 years	182,066
35–44 years	139,237
45–54 years	117,811
55–64 years	90,294
65–74 years	48,426
75–84 years	17,305
85 years and over	2,770

Table II. Numbers of live births and mother's age groups used to adjust maternal mortality rates to live births in the United States in 1970

Mother's age	Number
All ages	3,731,386
Under 20 years	656,460
20–24 years	1,418,874
25–29 years	994,904
30–34 years	427,806
35 years and over	233,342

The data from the National Health Interview Survey (NHIS), National Health Examination Survey (NHES), National Health and Nutrition Examination Survey (NHANES), National Ambulatory Medical Care Survey (NAMCS), and the National Hospital Discharge Survey (NHDS) are age adjusted to the 1970 civilian noninstitutionalized population. Most of the data from the NHIS, NAMCS, and NHDS are age adjusted using the following four age groups: under 15 years, 15–44 years, 45–64 years, and 65 years and over. The NHES and NHANES data are age adjusted using the following five age groups: 25–34 years, 35–44 years, 45–54 years, 55–64 years, and 65–74 years. The 1970 civilian noninstitutionalized population used to age adjust data from each survey are shown in table III and derived as follows: Institutionalized population = (1 – proportion of total population not institutionalized on April 1, 1970) x total population on July 1, 1970. Civilian noninstitutionalized population = civilian population on July 1, 1970 – institutionalized population.

Average annual rate of change (percent change)—In this report, average annual rates of change or growth rates are calculated as follows:

$$((P_n/P_o)^{1/N} - 1) \times 100$$

where P_n = later time period
P_o = earlier time period
N = number of years in interval

This geometric rate of change assumes that a variable increases or decreases at the same rate during each year between the two time periods.

Race—Beginning in 1976, the Federal Government's data systems classified individuals into the following racial groups: American Indian or Alaskan Native, Asian or Pacific Islander, black, and white. In this report, three racial categories are generally used: "white," "all other," and "black." The "all other" category includes all races other than white.

Depending on the data source, the classification by race may be based on self-classification or on observation by an interviewer or other persons filling out the questionnaire. In the National Vital Statistics System, newborn infants are assigned the race of their parents. If the parents are of different races and one is white, the child is assigned the other parent's race. If either parent is Hawaiian, the child is classified as Hawaiian. In all other cases the child is assigned the father's race. Prior to 1964, the National Vital Statistics System classified all births for which race was unknown as "white." Beginning in 1964 these births are classified according to information on the previous record. The National Health Interview Survey assigns children whose parents are of different races to the race of the father.

Family income—For purposes of the National Health Interview Survey and National Health and Nutrition Examination Survey, all people within a

Table III. Population and age groups used to adjust data to the U.S. civilian noninstitutionalized population in 1970: Selected surveys

Survey and age	Number in thousands
NHIS, NAMCS, and NHDS	
All ages	199,584
Under 15 years	57,745
15–44 years	81,189
45–64 years	41,537
65 years and over	19,113
NHIS health care coverage	
65 years and over	19,113
65–74 years	12,224
75 years and over	6,889
NHIS smoking data	
All ages	123,072
20–24 years	15,378
25–34 years	24,430
35–44 years	22,614
45–64 years	41,537
65 years and over	19,113
NHES and NHANES	
All ages	100,804
25–34 years	24,430
35–44 years	22,614
45–54 years	23,070
55–64 years	18,467
65–74 years	12,223

Source: Calculated from Bureau of Census: Estimates of the Population of the United States by Age, Sex, and Race: 1970 to 1977. Population Estimates and Projections. *Current Population Reports*. Series P-25, No. 721, Washington. U.S. Government Printing Office, April 1978.

household related to each other by blood, marriage, or adoption constitute a family. Each member of a family is classified according to the total income of the family. Unrelated individuals are classified according to their own income. Family income, then, is the total income received by the members of a family (or by an unrelated individual) in the 12 months prior to interview, including wages, salaries, rents from property, interest, dividends, profits and fees from their own businesses, pensions, and help from relatives.

Marital status—The population is classified through self-reporting into the categories married and unmarried. Married includes all married people including those separated from their spouses. Unmarried includes those who are single (never married), divorced, or widowed. The Abortion Surveillance Reports of the Centers for Disease Control classify separated people as unmarried for all States except Rhode Island.

Population—The U.S. Bureau of the Census collects and publishes data on several different types of population in the United States. Various statistical systems then use the appropriate population in calculating rates.

Total population is the population of the United States, including all members of the Armed Forces living in foreign countries, Puerto Rico, Guam, and the U.S. Virgin Islands. Other Americans abroad (e.g., civilian Federal employees and dependents of members of the Armed Forces or other Federal employees) are not included.

Resident population is the population living in the United States. This includes members of the Armed Forces stationed in the United States and their families as well as foreigners working or studying here; it excludes foreign military, naval, and diplomatic personnel and their families located here and residing in embassies or similar quarters as well as Americans living abroad. The resident population is often the denominator when calculating birth and death rates and incidence of disease.

Civilian population is the resident population excluding members of the Armed Forces. Families of members of the Armed Forces are included, however. This population is the denominator in rates calculated for the NCHS National Hospital Discharge Survey.

Civilian noninstitutionalized population is the civilian population not residing in institutions. Institutions include correctional institutions, detention homes, and training schools for juvenile delinquents; homes for the aged and dependent (e.g., nursing homes and convalescent homes); homes for dependent and neglected children; homes and schools for the mentally or physically handicapped; homes for unwed mothers; psychiatric, tuberculosis, and chronic disease hospitals; and residential treatment centers. This population is the denominator in rates calculated for the National Center for Health Statistics' National Health Interview Survey, National Health and Nutrition Examination Survey, and National Ambulatory Medical Care Survey.

Geographic Terms

Division and region—The 50 States and the District of Columbia are grouped for statistical purposes by the U.S. Bureau of the Census into nine divisions within four regions. The groupings are as follows:

- Northeast
  - New England
    - Maine, New Hampshire, Vermont, Massachusetts, Rhode Island, Connecticut
  - Middle Atlantic
    - New York, New Jersey, Pennsylvania
- Midwest
  - East North Central
    - Ohio, Indiana, Illinois, Michigan, Wisconsin
  - West North Central
    - Minnesota, Iowa, Missouri, North Dakota, South Dakota, Nebraska, Kansas
- South
  - South Atlantic
    - Delaware, Maryland, District of Columbia, Virginia, West Virginia, North Carolina, South Carolina, Georgia, Florida
  - East South Central
    - Kentucky, Tennessee, Alabama, Mississippi
  - West South Central
    - Arkansas, Louisiana, Oklahoma, Texas
- West
  - Mountain
    - Montana, Idaho, Wyoming, Colorado, New Mexico, Arizona, Utah, Nevada
  - Pacific
    - Washington, Oregon, California, Alaska, Hawaii

Registration area—The United States has separate registration areas for birth, death, marriage, and divorce statistics, which collect data annually from States whose registration data are at least 90-percent complete.

The *death registration area* was established in 1900 with 10 States and the District of Columbia, and the *birth registration area* was established in 1915, also with 10 States and the District of Columbia. Both areas have covered the entire United States since 1933. Currently, Puerto Rico, the U.S. Virgin Islands, and Guam are also included, although in statistical tabulations they are not part of the U.S. total.

Reporting area—In the National Vital Statistics System, reporting requirements on birth certificates vary according to State. Thus, different numbers of States report various characteristics. For example, in 1979, the month during which prenatal care began was reported in 49 States and the District of Columbia.

Metropolitan statistical area (MSA)—The definitions and titles of MSA's are established by the U.S. Office of Management and Budget with the advice of the Federal Committee on Metropolitan Statistical Areas. Generally speaking, an MSA consists of a county or group of counties containing at least one city (or twin cities) having a population of 50,000 or more plus adjacent counties that are metropolitan in character and are economically and socially integrated with the central city. In New England, towns and cities rather than counties are the units used in defining MSA's. There is no limit to the number of adjacent counties included in the MSA as long as they are integrated with the central city, nor is an MSA limited to a single State; boundaries may cross State lines. The metropolitan population in this report is based on MSA's as defined in the 1980 census and does not include any subsequent additions or changes.

Health Status and Determinants

Fertility

Abortion—The Centers for Disease Control's surveillance program counts *legal abortions* only. For surveillance purposes, legal abortion is defined as a procedure performed by a licensed physician or someone acting under the supervision of a licensed physician.

Birth rate—This measure divides the number of live births in a population in a given period by the resident population at the middle of that period. It is expressed as the number of live births per 1,000 population. The rate may be restricted to births to women of specific age, race, marital status, or geographic location, or it may be related to the entire population.

Completed fertility rate—Sum of the central birth rates over all ages (14–49 years) of childbearing for a given birth cohort.

Gestation—For both the National Vital Statistics System and the Centers for Disease Control's Abortion Surveillance, the period of gestation is defined as beginning with the first day of the last normal menstrual period and ending with the day of birth.

Live birth—In the World Health Organization's definition, also adopted by the United Nations and the National Center for Health Statistics, a live birth is the complete expulsion or extraction from its mother of a product of conception, irrespective of the duration of the pregnancy, which, after such separation, breathes or shows any other evidence of life such as heartbeat, umbilical cord pulsation, or definite movement of voluntary muscles, whether or not the umbilical cord has been cut or the placenta is attached. Each product of such a birth is considered live born.

Live-birth order—In the National Vital Statistics System, this item from the birth certificate indicates the number of live births a woman has had, counting the birth being recorded.

Low birth weight—Prior to 1979 low birth weight was defined as 2,500 grams or less. Beginning in 1979, low birth weight is defined as less than 2,500 grams.

Mortality

Cause of death—For the purpose of national mortality statistics, every death is attributed to one underlying condition, based on information reported on the death certificate and utilizing the international rules for selecting the underlying cause of death from the reported conditions. For data years 1979–84 the *International Classification of Diseases, Ninth Revision* is used for coding. Earlier data used the then current revision of the *International Classification of Diseases* (tables IV and V).

Use of successive revisions for classification of diseases may introduce discontinuities in the comparability of cause-of-death statistics over time. For further discussion, see the technical appendixes of the annual volumes of *Vital Statistics of the United States*, Volume II, Mortality, produced by the National Center for Health Statistics. The most recent published volume is: *Vital Statistics of the United States, 1981*, Volume II, Mortality, Part A DHHS Pub. No. (PHS) 86-1101, Public Health Service, Washington, U.S. Government Printing Office, 1986.

Death rate—This measure is derived by dividing the number of deaths in a population in a given period by the resident population at the middle of that period. It is expressed as the number of deaths per 1,000 or 100,000 population. It may be restricted to deaths in specific age, race, sex, or geographic groups or it may be related to the entire population.

Infant mortality—Infant mortality is the death of live-born children who have not reached their first birthday and is usually expressed as a rate (i.e., the number of infant deaths during a year per 1,000 live births reported in the year).

International Classification of Diseases, Ninth Revision—The *International Classification of Diseases* (ICD) classifies mortality information for statistical purposes. ICD was first used in 1900 and has been revised about every 10 years since then. The *Ninth Revision*, published in 1977, is used to code U.S. mortality data beginning with data for 1979. The clinical modification of the *Ninth Revision* is used to code U.S. morbidity data.

Both are arranged in 17 main chapters. Most of the diseases are arranged according to their principal anatomical site, with special chapters for infective and parasitic diseases; neoplasms; endocrine, metabolic, and nutritional diseases; mental diseases; complications of pregnancy and childbirth; certain diseases peculiar to the perinatal period; and ill-defined conditions. In addition, two supplemental classifications are provided: the classification of factors influencing health status and contact with health service and the classification of external causes of injury and poisoning.

Neonatal mortality rate—The neonatal mortality rate is the number of deaths under 28 days of age per 1,000 live births.

Postneonatal mortality rate—The postneonatal mortality rate is the number of deaths that occur from 28 days to 365 days after birth per 1,000 live births.

Fetal death rate—The fetal death rate is the number of fetal deaths with stated or presumed gestation of 20 weeks or more per 1,000 live births plus fetal deaths.

Late fetal death rate—The late fetal death rate is the number of fetal deaths with stated or presumed gestation of 28 weeks or more per 1,000 live births plus late fetal deaths.

Perinatal mortality rate—The perinatal mortality rate is the number of late fetal deaths plus infant deaths within 7 days of birth per 1,000 live births plus late fetal deaths.

Perinatal mortality ratio—The perinatal mortality ratio is the number of late fetal deaths plus infant deaths within 7 days of birth per 1,000 live births.

Life expectancy—Life expectancy is the average number of years of life remaining to a person at a particular age and is based on a given set of age-specific death rates, generally the mortality conditions existing in the period mentioned. Life expectancy may be determined by race, sex, or other characteristics using age-specific death rates for the population with that characteristic.

Years of potential life lost—Years of potential life lost are calculated over the age range from birth to 65 years. The number of deaths for each age group is multiplied by the years of life lost (the difference between 65 and the midpoint of the age group) and then years of potential life lost are summed over all age groups. (Centers for Disease Control. *MMWR*. Dec. 19, 1986. Vol. 35, Supp. No. 2S.)

Table IV. Revision of the International Classification of Diseases, according to year of conference by which adopted and years in use in United States

Revision of the International Classification of Diseases	Year of conference by which adopted	Years in use in United States
First	1900	1900–1909
Second	1909	1910–1920
Third	1920	1921–1929
Fourth	1929	1930–1938
Fifth	1938	1939–1948
Sixth	1948	1949–1957
Seventh	1955	1958–1967
Eighth	1965	1968–1978
Ninth	1975	1979–present

Determinants and Measures of Health

AIDS—Acquired immunodeficiency syndrome (AIDS) is an illness characterized by:

- One or more specified indicator diseases (listed in the complete case definition) and
- Either a positive test for human immunodeficiency virus infection or absence of specified causes of underlying immunodeficiency.

The AIDS case definition was changed in September 1987 to allow for the presumptive diagnosis of AIDS-associated diseases and conditions and to expand the spectrum of HIV-associated diseases reportable as AIDS. The list of expanded diseases includes HIV encephalopathy, HIV wasting syndrome, and others.

For more information, see: Centers for Disease Control. Revision of the CDC Surveillance Case definition for acquired immunodeficiency syndrome. *MMWR* 1987; 36 (suppl. no. 1S): 1S–15S.

Condition—A health condition is a departure from a state of physical or mental well-being. Conditions, except impairments, are coded according to the *International Classification of Diseases, 9th Revision, Clinical Modification* (ICD–9–CM).

Based on duration, there are two categories of conditions, acute and chronic. In the National Health Interview Survey, an *acute condition* is a condition that has lasted less than 3 months and has involved either a physician visit (medical attention) or restricted activity, and a *chronic condition* is any condition lasting 3 months or more or is one of certain conditions classified as chronic regardless of their time of onset. The National Nursing Home Survey uses a specific list of conditions classified as chronic, also disregarding time of onset.

Disability—Disability is any temporary or long-term reduction of a person's activity as a result of an acute or chronic condition. It is often measured in terms of the number of days that a person's activity has been reduced.

Disability day—The National Health Interview Survey identifies several types of days on which a person's usual activity is reduced because of illness or injury (reported for the 2-week period preceding the week of the interview). These short-term disability days are not mutually exclusive categories but are defined as follows:

A *restricted-activity day* is any day on which a person cuts down on his or her usual activities for all or most of that day because of an illness or an injury. Restricted-activity days are unduplicated counts of bed-disability, work-loss, and school-loss days as well as other days during which a person cuts down on his or her usual activities.

A *bed-disability day* is a day on which a person stays in bed for more than half of the daylight

Table V. Cause-of-death codes, according to applicable revision of *International Classification of Diseases*

Cause of death	Code numbers			
	Sixth Revision	Seventh Revision	Eighth Revision	Ninth Revision
Diseases of heart	400–402, 410–443	400–402, 410–443	390–398, 402, 404, 410–429	390–398, 402, 404–429
Cerebrovascular diseases	330–334	330–334	430–438	430–438
Malignant neoplasms	140–205	140–205	140–209	140–208
Respiratory system	160–164	160–164	160–163	160–165
Colorectal	153–154	153–154	153–154	153, 154
Breast	170	170	174	174, 175
Prostate	177	177	185	185
Chronic obstructive pulmonary diseases	241, 501, 502, 527.1	241, 501, 502, 527.1	490–493, 519.3	490–496
Pneumonia and influenza	480–483, 490–493	480–483, 490–493	470–474, 480–486	480–487
Tuberculosis	001–019	001–019	010–019	010–018
Chronic liver disease and cirrhosis	581	581	571	571
Diabetes mellitus	260	260	250	250
Accidents and adverse effects	E800–E962	E800–E962	E800–E949	E800–E949
Motor vehicle accidents	E810–E835	E810–E835	E810–E823	E810–E825
Suicide	E963, E970–E979	E963, E970–E979	E950–E959	E950–E959
Homicide and legal intervention	E964, E980–E985	E964, E980–E985	E960–E978	E960–E978
Complications of pregnancy, childbirth, and the puerperium	640–689	640–689	630–678	630–676
Abnormal findings of performance and [illegible]	...	...	158, 163.0	158, 163
Cholelithiasis	...	...	515.1	500
Asbestosis	...	...	515.2	501
Silicosis	...	...	515.0	502
Bladder cancer	...	...	...	188
Lymphatic and myeloid acute leukemias	...	...	...	204.0, 204.2, 204.8, 205.0 205.2, 205.8

hours (or normal waking hours) because of a specific illness or injury. All *hospital days* are bed-disability days. Bed-disability days may also be work-loss or school-loss days.

A *work-loss day* is a day on which a person did not work at his or her job or business for at least half of his or her normal workday because of a specific illness or injury. The number of work-loss days is determined only for currently employed persons.

A *school-loss day* is a day on which a child did not attend school for at least half of his or her normal school day because of a specific illness or injury. School-loss days are determined only for children 6–16 years of age.

Former smoker—Any person who has smoked at least 100 cigarettes during his or her entire life but who reports smoking no cigarettes at the present time is a former smoker.

Incidence—Incidence is the number of cases of disease having their onset during a prescribed period of time and is often expressed as a rate (e.g., the incidence of measles per 1,000 children 5–15 years of age during a year). Incidence is a measure of morbidity or other events that occur within a specified period of time.

Limitation of activity—Each person identified by the National Health Interview Survey as having a chronic condition is classified according to the extent to which his or her activities are limited because of the condition as follows:

- Persons unable to carry on *major activity*.
- Persons limited in the amount or kind of major activity performed.
- Persons not limited in major activity but otherwise limited.
- Persons not limited in activity.

Major activity (or usual activity)—This is the principal activity of a person or of his or her age-sex group. For 1–5 years of age, it refers to ordinary play with other children; for 6–16 years of age, it refers to school attendance; for 17 years of age and over, it usually refers to a job, housework, or school attendance.

Notifiable disease—A notifiable disease is one that health providers are required, usually by law, to report to Federal, State, or local public health officials when diagnosed. Notifiable diseases are those of public interest by reason of their contagiousness, severity, or frequency.

Particulate matter—Particulate matter is defined as particles of solid or liquid matter in the air, including both nontoxic materials (soot, dust, and dirt) and toxic materials (lead, asbestos, suspended sulfates and nitrates, etc.).

Pollutant—A pollutant is any substance that renders the atmosphere or water foul or noxious to health.

Prevalence—Prevalence is the number of cases of a disease, infected persons, or persons with some other attribute present during a particular interval of time. It is often expressed as a rate (e.g., the prevalence of diabetes per 1,000 persons during a year).

Relative survival rate—The relative survival rate is the ratio of the observed survival rate for the patient group to the expected survival rate for persons in the general population similar to the patient group with respect to age, sex, race, and calendar year of observation. The 5-year relative survival rate is used to estimate the proportion of cancer patients potentially curable. Because over half of all cancers occur in persons 65 years of age and over, many of these individuals die of other causes with no evidence of recurrence of their cancer. Thus, because it is obtained by adjusting observed survival for the normal life expectancy of the general population of the same age, the relative survival rate is an estimate of the chance of surviving the effects of cancer.

Utilization and Resources

Ambulatory Care

Dental visit—The National Health Interview Survey counts visits to a dentist's office for treatment or advice, including services by a technician or hygienist acting under the dentist's supervision, as dental visits. Services provided to hospital inpatients are not included.

Office—In the National Health Interview Survey, an office refers to the office of any physician in private practice, including physicians connected with prepaid group practices. In the National Ambulatory Medical Care Survey, an office is any location for a physician's ambulatory practice other than hospitals, nursing homes, other extended care facilities, patients' homes, and industrial clinics. However, private offices in hospitals are included.

Physician contact—The National Health Interview Survey counts as a physician contact a visit in person or by telephone to a doctor of medicine or doctor of osteopathy for the purpose of examination, diagnosis, treatment, or advice. The service may be provided directly by the physician or by a nurse or other person acting under the physician's supervision. Contacts involving services provided on a mass basis are not included nor are contacts for hospital inpatients.

Physician contacts are generally classified by the type of place of contact. In the National Health Interview Survey, this includes the *office, hospital outpatient clinic or emergency room, telephone* (advice given by a physician in a telephone call), *home* (any place in which a person was staying at the time a physician was called there), as well as other places.

In the National Ambulatory Medical Care Survey, an *office visit* is any direct personal exchange between an ambulatory patient and a physician or members of his or her staff for the purposes of seeking care and rendering health services.

Inpatient Care

Average daily census or average daily patients—This refers to the average number of inpatients receiving care each day during a reporting period, excluding newborns.

Average length of stay—In the National Hospital Discharge Survey, the average length of stay is the total number of patient days accumulated at the time of discharge, counting the date of admission but not the date of discharge by patients discharged during a reporting period, divided by the number of patients discharged.

As measured in the National Nursing Home Survey, *length of stay for residents* is the time from their admission until the reporting time, and the *length of stay for discharges* is the time between the date of admission and the date of discharge.

Bed—Any bed that is set up and staffed for use for inpatients is counted as a bed in a facility. In the National Master Facility Inventory, the count is of beds at the end of the reporting period; for the American Hospital

Association, it is of the average number of beds during the entire period. The World Health Organization defines a hospital bed as one regularly maintained and staffed for the accommodation and fulltime care of a succession of inpatients and situated in a part of the hospital where continuous medical care for inpatients is provided.

Day—According to the American Hospital Association and National Master Facility Inventory, days or *inpatient days* are the number of adult and pediatric days of care rendered during a reporting period. Days of care for newborns are excluded.

In the National Health Interview Survey, *hospital days during the year* refer to the total number of hospital days occurring in the 12-month period prior to the interview week. A *hospital day* is a night spent in the hospital for persons admitted as inpatients to a hospital.

In the National Hospital Discharge Survey, *days of care* refer to the total number of patient days accumulated by patients at the time of discharge from non-Federal short-stay hospitals during a reporting period. All days from and including the date of admission but not including the date of discharge are counted. A *patient* is a person who is formally admitted to the inpatient service of the hospital for observation, care, diagnosis, or treatment.

Discharge—The National Health Interview Survey defines a *hospital discharge* as the completion of any continuous period of stay of 1 night or more in a hospital as an inpatient, excepting the period of stay of a well newborn infant.

According to the National Hospital Discharge Survey, American Hospital Association, and National Master Facility Inventory, this is the formal release of an inpatient by a hospital, i.e., the termination of a period of hospitalization (including stays of 0 nights) by death or by disposition to a place of residence, nursing home, or another hospital. In this report, newborn infants are excluded.

In the National Nursing Home Survey, this is the formal release of a resident by a nursing home.

First-listed diagnosis—In the National Hospital Discharge Survey, this is the diagnosis listed first on the face sheet of the medical record.

Hospital—According to the American Hospital Association (AHA) and National Master Facility Inventory (NMFI), hospitals are institutions licensed as hospitals whose primary function is to provide diagnostic and therapeutic patient services for medical conditions and that have at least six beds, an organized physician staff, and continuous nursing services under the supervision of registered nurses. AHA data differ slightly from those of NMFI, because data from NMFI reflect osteopathic hospitals as well as hospitals not registered with AHA. Non-AHA hospitals comprise 5–10 percent of all hospitals in the country. The World Health Organization considers an establishment a hospital if it is permanently staffed by at least one physician, can offer inpatient accommodation, and can provide active medical and nursing care.

Hospitals may be classified by type of service, ownership, and length of stay.

General hospitals provide both diagnostic and treatment services for patients with a variety of medical conditions, both surgical and nonsurgical. According to the World Health Organization, these hospitals provide medical and nursing care for more than one category of medical discipline (e.g., general medicine, specialized medicine, general surgery, specialized surgery, and obstetrics); excluded are hospitals, usually ones in rural areas, that provide a more limited range of care.

Psychiatric hospitals are ones whose major type of service is psychiatric care. (See Psychiatric Care section.)

Specialty hospitals, such as psychiatric, tuberculosis, chronic disease, rehabilitation, maternity, and alcoholic or narcotic, provide a particular type of service to the majority of their patients.

Federal hospitals are operated by the Federal Government.

NonFederal government hospitals are operated by State or local governments.

Nonprofit hospitals are operated by a church or other nonprofit organization.

Proprietary hospitals are operated for profit by individuals, partnerships, or corporations.

Community hospitals include all non-Federal short-stay hospitals classified by the American Hospital Association according to one of the following services: general medical and surgical; obstetrics and gynecology; eye, ear, nose, and throat; rehabilitation; orthopedic; other specialty; children's general; children's eye, ear, nose, and throat; children's rehabilitation; children's orthopedic; and children's other specialty.

Short-stay hospitals in the National Hospital Discharge Survey are those in which the average length of stay is less than 30 days. The American Hospital Association and National Master Facility Inventory define *short-term hospitals* as hospitals in which more than half the patients are admitted to units with an average length of stay of less than 30 days and *long-term hospitals* as ones in which more than half the patients are admitted to units with an average length of stay of 30 days or more. The National Health Interview Survey defines *short-stay hospitals* as any hospital or hospital department in which the type of service provided is general; maternity; eye, ear, nose, and throat; children's; or osteopathic.

Registered hospitals are hospitals registered with the American Hospital Association. About 98 percent of hospitals are registered.

International Classification of Diseases, 9th Revision, Clinical Modification (ICD–9–CM)—The ICD–9–CM is based on and is completely compatible with the *International Classification of Diseases, Ninth Revision*. The *Ninth Revision* is used to code mortality data (Mortality section), and ICD–9–CM is used to code morbidity data.

Diagnostic groupings and code number inclusions are shown in table VI; surgical groupings and code number inclusions are shown in table VII; and diagnostic and other nonsurgical procedure groupings and code number inclusions are shown in table VIII.

Nursing care—Nursing care is the provision of any of the following services: Application of dressings or bandages; bowel and bladder retraining; catheterization; enema; full bed bath; hypodermic, intramuscular, or intravenous injection; irrigation; nasal feeding; oxygen therapy; and

Table VI. Codes for diagnostic categories from the *International Classification of Diseases, 9th Revision, Clinical Modification*

Diagnostic category	*Code numbers*
Females with delivery	V27
Acquired immunodeficiency syndrome (AIDS)	042.0-042.2, 042.9, 279.19
Malignant neoplasms	140-208, 230-234
Benign neoplasms	210-229, 235-239
Diabetes	250
Psychoses	290-299
Alcohol dependence syndrome	303
Eye diseases and conditions	360-379
Otitis media and eustachian tube disorders	381-382
Diseases of heart	391-392.0, 393-398, 402, 404, 410-416, 420-429
Cerebrovascular diseases	430-438
Acute respiratory infection	460-466
Chronic disease of tonsils and adenoids	474
Pneumonia, all forms	480-486
Bronchitis, emphysema, and asthma	490-493
Inguinal hernia	550
Noninfectious enteritis and colitis	555-556, 558
Cholelithiasis	574
Hyperplasia of prostate	600
Inflammatory disease of female pelvic organs	614-616
Disorders of menstruation	626
Pregnancy with abortive outcome	630-639
Intervertebral disc disorders	722
Congenital anomalies	740-759
Fracture, all sites	800-829
Lacerations and open wounds	870-904

temperature-pulse-respiration or blood pressure measurement.

Nursing home—A nursing home is an establishment with three or more beds that provides nursing or personal care to the aged, infirm, or chronically ill. Definitions of nursing home types apply to data collected through 1977.

Nursing care homes must employ one or more full-time registered or licensed practical nurses and must provide nursing care to at least half the residents.

Personal care homes with nursing have some but fewer than half the residents receiving nursing care. In addition, such homes must employ one or more registered or licensed practical nurses or must provide administration of medications and treatments in accordance with physicians' orders, supervision of self-administered medications, or three or more personal services.

Personal care homes without nursing have no residents receiving nursing care. These homes provide administration of medications and treatments in accordance with physicians' orders, supervision of self-administered medications, or three or more personal services.

Domiciliary care homes primarily provide supervisory care but also provide one or two personal services.

Certification of nursing homes—Facilities are certified by the Medicare and/or Medicaid program. Definitions of certification levels apply to data collected through 1985.

Skilled nursing facilities provide the most intensive nursing care available outside of a hospital. Facilities certified by Medicare provide posthospital care to eligible Medicare enrollees. Facilities certified by Medicaid as skilled nursing facilities provide skilled nursing services on a daily basis to individuals eligible for Medicaid benefits.

Intermediate care facilities are certified by the Medicaid program to provide health-related services on a regular basis to Medicaid eligibles who do not require hospital or skilled nursing facility care but do require institutional care above the level of room and board.

Not certified facilities are not certified as providers of care by Medicare or Medicaid.

Occupancy rate—The National Master Facility Inventory and American Hospital Association define *hospital occupancy rate* as the average daily census divided by the number of hospital beds during a reporting period. The *occupancy rate for other facilities* is calculated as the number of residents reported at the time of the interview divided by the number of beds reported.

Table VII. Codes for surgical categories from the *International Classification of Diseases, 9th Revision, Clinical Modification*

Surgical category	*Code numbers*
Extraction of lens	13.1-13.6
Insertion of prosthetic lens (pseudophakos)	13.7
Myringotomy	20.0
Tonsillectomy, with or without adenoidectomy	28.2-28.3
Adenoidectomy without tonsillectomy	28.6
Direct heart revascularization (coronary bypass)	36.1
Cardiac catheterization	37.21-37.23
Pacemaker insertion, replacement, removal, and repair	37.7-37.8
Biopsies on the digestive system	42.24, 44.14, 44.15, 45.14,45.15, 45.25, 45.26, 45.27, 48.24, 48.25, 48.26, 49.22, 49.23, 50.11, 50.12, 51.12, 51.13, 52.11, 52.12, 54.22, 54.23
Appendectomy, excluding incidental	47.0
Cholecystectomy	51.2
Repair of inguinal hernia	53.0-53.1
Prostatectomy	60.2-60.6
Circumcision	64.0
Oophorectomy and salpingo-oophorectomy	65.3-65.6
Bilateral destruction or occlusion of fallopian tubes	66.2-66.3
Hysterectomy	68.3-68.7
Diagnostic dilation and curettage of uterus	69.09
Procedures to assist delivery	72-73
Cesarean section	74.0-74.2, 74.4, 74.99
Repair of current obstetrical laceration	75.5-75.6
Reduction of fracture (excluding skull, nose, and jaw)	76.70, 76.76-76.79, 79.0-79.6
Excision or destruction of intervertebral disc and spinal fusion	80.5, 81.0
Excision of semilunar cartilage of knee	80.6
Arthroplasty and replacement of hip	81.5-81.6
Operations on muscles, tendons, fascia, and bursa	82-83.1, 83.3-83.9
Biopsies on the integumentary system (breast, skin, and subcutaneous tissue)	85.11-85.12, 86.11

Procedure category	Code number
Spinal tap	03.31
Endoscopy of small intestine	45.11–45.13
Endoscopy of large intestine	45.21–45.24
Laparoscopy (excluding that for ligation and division of fallopian tubes)	54.21
Cystoscopy	57.31–57.32
Arthroscopy of knee	80.26
Computerized axial tomography (CAT scan)	87.03, 87.41, 87.71, 88.01, 88.38
Contrast myelogram	87.21
Biliary tract x ray	87.5
Arteriography using contrast material	88.4
Angiocardiography using contrast material	88.5
Diagnostic ultrasound	88.7
Electroencephalogram	89.14
Radioisotope scan	92.0–92.1
Application of cast or splint	93.51, 93.53–93.54

Outpatient visit—According to the American Hospital Association, these are visits by patients not lodged in the hospital for medical, dental, or other services (See Ambulatory Care section.)

Resident—In the National Nursing Home Survey, a resident is a person who has been formally admitted to but not discharged from an establishment.

Psychiatric Care

The definitions for psychiatric care are those used by the National Institute of Mental Health.

Admission—An individual is classified as an admission to a psychiatric organization by being a new admission, a readmission, a return from leave, or a transfer from another service of the same organization or another organization.

Mental disorder—A mental disorder is any of several disorders listed in the *International Classification of Diseases, 9th Revision, Clinical Modification* (ICD–9–CM) or *Diagnostic and Statistical Manual of Mental Disorders, Third Edition* (DSM–III). Table IX shows diagnostic categories and code numbers for ICD–9–CM/DSM–III and corresponding codes for the *International Classification of Diseases, Adapted for Use in the United States, 8th Revision* (ICDA–8) and *Diagnostic and Statistical Manual of Mental Disorders, Second Edition* (DSM–II).

Mental health organization—A mental health organization is an administratively distinct public or private agency or institution whose primary concern is the provision of direct mental health services to the mentally ill or emotionally disturbed. Organizations include State and county and private psychiatric hospitals, psychiatric services of general hospitals, residential treatment centers for emotionally disturbed children, federally funded community mental health centers (prior to 1983), freestanding outpatient psychiatric clinics and partial care organizations, and multiservice mental health organizations.

Psychiatric hospitals are hospitals primarily concerned with providing inpatient care and treatment for the mentally ill. *Psychiatric inpatient units of Veterans Administration general hospitals* and *Veterans Administration neuropsychiatric hospitals* are combined into the category *Veterans Administration psychiatric hospitals* because of their similarity in size, operation, and length of stay. Other psychiatric hospitals include State and county mental hospitals and private mental hospitals.

General hospitals providing psychiatric services are hospitals that knowingly and routinely admit patients to a separate psychiatric service for the purpose of diagnosing and treating psychiatric illness.

Residential treatment centers for emotionally disturbed children are residential institutions primarily serving emotionally disturbed children and providing treatment services, usually under the supervision of a psychiatrist.

Federally funded community mental health centers (prior to 1983) are legal entities through which comprehensive mental health services are provided to a delineated catchment area. This mental health delivery system may be implemented by a single facility (with or without subunits) or by a group of affiliated facilities that make available at least the following essential mental health services: inpatient, day treatment, outpatient, emergency care, and community consultation and education.

Freestanding psychiatric outpatient clinics are administratively distinct facilities, the primary purpose of which is to provide nonresidential mental health service and where a psychiatrist assumes medical responsibility for all patients and/or directs the mental health program.

Service mode—Service mode and *treatment modality* refer generally to the kinds of mental health service available: inpatient care, outpatient care, partial care, etc.

Inpatient care is the provision of mental health treatment to people requiring 24-hour supervision.

Outpatient care is the provision of mental health treatment on an outpatient basis and does not involve any overnight stay in an inpatient facility.

Partial care treatment is the provision of a planned therapeutic program during most or all of the day for groups of people needing broader programs than are possible through outpatient visits but who do not require full-time hospitalization.

Personnel

Full-time equivalent employee (FTE)—The American Hospital Association and National Master Facility Inventory use an estimate of full-time equivalent employees that counts two part-time employees as one full-time employee, a *full-time employee* being someone working 35 hours or more a week. The National Nursing Home Survey uses an estimate of full-time employees that counts 35 hours of part-time employees' work per week as equivalent to one full-time employee.

Physician—Physicians are licensed doctors of medicine or osteopathy classified by the American Medical Association and others through self reporting as follows:

Active physicians or *professionally active physicians* are ones currently practicing, regardless of the

Table IX. Mental illness codes, according to applicable revision of the *Diagnostic and Statistical Manual of Mental Disorders* and *International Classification of Diseases*

Diagnostic category	DSM-II/ICDA-8	DSM-III/ICD-9-CM
Alcohol-related	291; 303; 309.13	291; 303; 305.0
Drug-related	294.3; 304; 309.14	292; 304; 305.1–305.9; 327; 328
Organic disorders (other than alcoholism and drug)	290; 292; 293; 294 (except 294.3); 309.0; 309.2–309.9	290; 293; 294; 310
Affective disorders	296; 298.0; 300.4	296; 298.0; 300.4; 301.11; 301.13
Schizophrenia	295	295; 299

number of hours worked per week. *Federal physicians* are employed by the Federal Government; *non-Federal* or *civilian physicians* are not.

Office-based physicians are physicians who spend the plurality of their time working in practices based in private offices; *hospital-based physicians* spend the plurality of their time as salaried physicians in hospitals.

Physician specialty—A physician specialty is any specific branch of medicine in which a physician may concentrate. The specialty classification used by the Bureau of Health Professions and National Ambulatory Medical Care Survey (NAMCS) follow these American Medical Association categories:

Primary care specialties include general practice (or family practice), internal medicine, and pediatrics.

Medical specialties include, along with internal medicine and pediatrics, the areas of allergy, cardiovascular disease, dermatology, gastroenterology, pediatric allergy and cardiology, and pulmonary diseases.

Surgical specialties include general surgery, neurological surgery, obstetrics and gynecology, ophthalmology, orthopedic surgery, otolaryngology, plastic surgery, colon and rectal surgery, thoracic surgery, and urology.

Other specialties covered by NAMCS are geriatrics, neurology, preventive medicine, psychiatry, and public health. Other specialties covered by the Bureau of Health Professions are aerospace medicine, anesthesiology, child psychiatry, neurology, occupational medicine, pathology, physical medicine and rehabilitation, psychiatry, public health, and radiology.

Health Expenditures

Consumer Price Index (CPI)—The CPI is prepared by the U.S. Bureau of Labor Statistics. It is a measure of the changes in average prices of the goods and services purchased by urban wage earners and by clerical workers and their families. The medical care component of the CPI shows trends in medical care prices based on specific indicators of hospital, medical, dental, and drug prices.

A revision of the CPI has been in use since January 1988, and changes are noted where applicable in this report.

Gross national product (GNP)/ Gross domestic product (GDP)—These are two broadly comparable measures of a nation's total output of goods and services. GNP represents the value of all goods and services produced for sale by the nation plus the estimated value of certain imputed outputs (i.e., goods and services that are neither bought nor sold). The GNP is the sum of: (1) consumption expenditures by both individuals and nonprofit organizations plus certain imputed values; (2) business investment in equipment, inventories, and new construction; (3) Federal, State, and local government purchases of goods and services; and (4) the sale of goods and services abroad minus purchases from abroad. GDP equals GNP plus an adjustment (typically small) for the value of productive services performed domestically by foreign subjects minus the value of productive services performed abroad by nationals.

Health maintenance organization (HMO)—A prepaid health plan delivering comprehensive care to members through designated providers, having a fixed monthly payment for health care services, and requiring members to be in plan for a specified period of time (usually 1 year). HMO model types are

Group—An HMO that delivers health services through a physician group that is controlled by the HMO unit or an HMO that contracts with one or more independent group practices to provide health services.

Individual Practice Association (IPA)—An HMO that contracts directly with physicians in independent practice, and/or contracts with one or more associations of physicians in independent practice, and/or contracts with one or more multispecialty group practices (but the plan is predominantly organized around solo-single specialty practices).

These definitions differ somewhat from those used by the Office of Health Maintenance Organizations for Federal designation.

Medicaid—This program is federally aided but State operated and administered. It provides medical benefits for certain low-income persons in need of medical care. The program, authorized in 1965 by Title XIX of the Social Security Act, categorically covers participants in the Aid to Families with Dependent Children program as well as some participants in the Supplemental Security Income program and other people deemed medically needy in a participating State. States also determine the benefits covered, rates of payment for providers, and methods of administering the program.

Medicare—This is a nationwide health insurance program providing health insurance protection to people 65 years of age and over, people eligible for social security disability payments for more than 2 years, and people with end-stage renal disease, regardless of income. The program was enacted July 30, 1965, as Title XVIII, *Health Insurance for the Aged*, of the Social Security Act and became effective on July 1, 1966. It consists of two separate but coordinated programs: hospital insurance (Part A) and supplementary medical insurance (Part B).

National health expenditures—This measure estimates the amount spent for all health services and supplies and health-related research and construction activities consumed in the United States during a specified time period. Detailed estimates are available by source of expenditure (e.g., direct payment, private health insurance, and government programs) and by type of expenditure (e.g., hospitals, physicians, and drugs). Data are compiled from a variety of sources that collect data from the providers of care.

Health services and supplies expenditures are outlays for goods and services relating directly to patient care plus expenses for administering health insurance programs and for government public health activities. This category is equivalent to total national health expenditures minus expenditures for research and construction.

Private expenditures are outlays for services provided or paid for by nongovernmental sources—consumers, insurance companies, private industry, and philanthropic organizations.

Public expenditures are outlays for services provided or paid for by Federal, State, and local government agencies or expenditures required by governmental action (such as workmen's compensation insurance payments).

Nursing home expenditures—These expenditures cover care rendered in skilled nursing and intermediate care facilities, including those for the mentally retarded. The costs of long-term care provided by hospitals are excluded.

Personal health care expenditures—These are outlays for goods and services relating directly to patient care. The expenditures in this category are total national health expenditures minus expenditures for research and construction, expenses for administering health insurance programs, and government public health activities.

State health agency (SHA)—The agency or department headed by the State or territorial health official. Generally, the SHA is responsible for setting State-wide public health priorities, carrying out national and State mandates, responding to public health hazards, and assuring access to health care for underserved State residents.